

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90005 017 ****61.25

DOCUMENT # 706942

1. Entity Name
**EXPERIMENTAL AIRCRAFT ASSOCIATION, INC.
CHAPTER 47**



Principal Place of Business
**451 8TH AVE SOUTHEAST
ST. PETERSBURG, FL 33701 US**

Mailing Address
**451 8TH AVE SOUTHEAST
ST. PETERSBURG, FL 33701 US**

DO NOT WRITE IN THIS SPACE



01232008 No Chg-NP CR2E037 (4/06)

4. FEI Number 04-3739859	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ANDERSON, GLENN
166 17TH AVENUE SOUTHEAST
SAINT PETERSBURG, FL 33701**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDERSON, GLENN 166 17TH AVE SOUTHEAST SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHIVERS, BILL 219 8TH STREET EAST TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KEWLEY, KERRI 2835 10TH STREET NORTH SAINT PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANTRIM, DANIEL 11525 108TH STREET NORTH LARGO, FL 33778
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Smith, Jim 326 5th Ave. N, Apt. 24 St. Petersburg, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Glenn A. Anderson, Pres. Glenn A. Anderson