

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709357

FILED
Mar 04, 2008
Secretary of State

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INC. CHAPTER 74

Current Principal Place of Business:

P. O. BOX 140571
ORLANDO, FL 32814 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 140571
ORLANDO, FL 32814 US

New Mailing Address:

FEI Number: 59-1918173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KESA, ROBERT
2319 SPRINGS LANDING BLVD
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

KOSAR, ROBERT
2319 SPRINGS LANDING BLVD
LONGWOOD, FL 32779 US

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.

SIGNATURE: ROBERT KOSAR

03/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WALTERS-PHILLIPS, BARBARA
Address: 957 PREDMONT OAKS DR
City-St-Zip: APOPKA, FL 32703

Title: T () Delete
Name: KOSAR, ROBERT
Address: 2319 SPRINGS LANDING BLVD
City-St-Zip: LONGWOOD, FL 32779

Title: S () Delete
Name: CARVETH, TIM
Address: 5 WEST SPRUCE ST
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: THOMAS, JIM
Address: 716 BALM ORAL RD
City-St-Zip: WINTER PARK, FL 32789

Title: P () Delete
Name: THOMAS, JIM
Address: 716 BALM OVAL RD
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: LUTZ, JERRY
Address: 747 FRIAR ROAD
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HOTZ, BRUCE
Address: 2710 RAEFORD ROAD
City-St-Zip: ORLANDO, FL 32806

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT KOSAR

T

03/04/2008

Electronic Signature of Signing Officer or Director

Date