2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713357

FILED Feb 04, 2007 Secretary of State

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INC., CHAPTER 66

Current Principal Place of Business: New Principal Place of Business:

10816 LANDING VIEW DR 10816 TAXI WAY ECHO

FORT MYERS, FL 33912 US PAGE FIELD

FORT MYERS, FL 33912 US

Current Mailing Address: New Mailing Address:

19108 COCONUT RD

FORT MYERS, FL 33912 US

FEI Number: 65-0242894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

YOCUM, PAUL 19108 COCONUT RD FORT MYERS, FL 33912

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:

Date

Electronic Signature of Registered Agent

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition YOCUM, PAUL YOCUM, PAUL E Name: Name:

19108 COCONUT RD Address: 19108 COCONUT RD Address: City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip: FORT MYERS, FL 33912 US

Title: DV Title: () Delete () Change () Addition

MCCLAIN, JIM Name: Name: Address: 311 SE 46TH LA. Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip:

Title: DS () Delete Title: (X) Change () Addition

CARPENTER, BRUCE THOMAS, PAUL Name: Name: 1916 SE 11TH TERRACE 4040 OLD TRAIL WAY Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: NAPLES, FL 34103

Title: DT Title: DT (X) Change () Addition () Delete

Name: SLOSS, CLAIR Name: SLOSS, CLAIRE

15030 BONOIVE CIRCLE 15030 BONAIRE CIRCLE Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL E. YOCUM DP 02/04/2007