

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722830

FILED
Apr 16, 2009
Secretary of State

Entity Name: TAVERNAERO AIRPORT PARK, INC.

Current Principal Place of Business:

180 S AIRPORT ROAD
TAVERNIER, FL 33070 US

New Principal Place of Business:

91795 OVERSEAS HIGHWAY
TAVERNIER, FL 33070 US

Current Mailing Address:

P.O. BOX 171
TAVERNIER, FL 33070 US

New Mailing Address:

FEI Number: 59-1506689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLOBACK, MIRIAM P
180 S AIRPORT ROAD
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

BURKEL, EMILY L
91795 OVERSEAS HIGHWAY
TAVERNIER, FL 33070 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: EMILY L BURKEL

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BALKCOM, CARRIE
Address: 3401 E VIRGINIA AVE
City-St-Zip: DENVER, CO 80209

Title: VP () Delete
Name: CARBONELL, TERRY
Address: 21530 PEARL STREET
City-St-Zip: ALVA, FL 33920

Title: T () Delete
Name: FRINS, JAY
Address: 135 N. AIRPORT RD.
City-St-Zip: TAVERNIER, FL 33070

Title: S () Delete
Name: SCHRADER, KATHY
Address: 203 APACHE STREET
City-St-Zip: TAVERNIER, FL 33070

Title: D () Delete
Name: WOOD, ALLEN
Address: 108 GARDENIA ST
City-St-Zip: TAVERNIER, FL 33070

Title: D () Delete
Name: YOST, ED
Address: 115 N. AIRPORT RD.
City-St-Zip: TAVERNIER, FL 33070

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: S (X) Change () Addition
Name: WOOD, ALLEN
Address: 108 GARDENIA ST
City-St-Zip: TAVERNIER, FL 33070

Title: D (X) Change () Addition
Name: CHASTEEN, TOM
Address: 40 MUTINY PLACE
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Change () Addition
Name: LAROCCO, JOHN
Address: 424 SUNSHINE BLVD
City-St-Zip: TAVERNIER, FL 33070

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: CARRIE BALKCOM

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date