

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90118 027 ****61.25

DOCUMENT # 726240

1. Entity Name

CYPRESS GARDENS CHAPTER OF THE EXPERIMENTAL AIRCRAFT ASSOCIATION, INC.



Principal Place of Business

**GILBERT FIELD AIRPORT
WINTER HAVEN FL 33881**

Mailing Address

**3084 21 ST NW
WINTER HAVEN FL 33881-1294
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **23-7414859**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**CAMPBELL, JAMES
7 FOREST DRIVE
DAVENPORT FL 33834**

7. Name and Address of New Registered Agent

Name **CHARLES STOREY**

Street Address (P.O. Box Number is Not Acceptable)
607 TAYLOR BLVD

City **WINTER HAVEN** **FL** Zip Code **33880**

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 *Charles L. Storey*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **CAMPBELL, JAMES H**
STREET ADDRESS **7 FOREST DRIVE**
CITY-ST-ZIP **DAVENPORT FL 33834**

TITLE **VP** ☒ Delete
NAME **DEMOND, KENT**
STREET ADDRESS **18 W BASS STREET**
CITY-ST-ZIP **KISSIMMEE FL 34741**

TITLE **T** ☐ Delete
NAME **TAYLOR, CURTIS**
STREET ADDRESS **19 AVIATION DRIVE**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE **S** ☒ Delete
NAME **DRESDEN, TIFFANNY**
STREET ADDRESS **246 HILL CT.**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE **D** ☐ Delete
NAME **RACETTI, G. DEAN**
STREET ADDRESS **1050 ARIANA BLVD**
CITY-ST-ZIP **AUBURNDAL FL 33823**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **CHAS L. STOREY**
STREET ADDRESS **607 TAYLOR BLVD**
CITY-ST-ZIP **WINTER HAVEN 33880**

TITLE ☒ Change ☐ Addition
NAME **RICHARD WOODSUM**
STREET ADDRESS **2715 IDLERIDGE DR**
CITY-ST-ZIP **WINTER HAVEN 33881**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **WM KLOPFENSTEIN**
STREET ADDRESS **3087 US HWY 17/92 W**
CITY-ST-ZIP **HAINES CITY 33844**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: *Charles L. Storey*

CHARLES L. STOREY

MAR 1 03

863-299-5358

CR2E037 (10/02)