2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Apr 28, 2006 8:00 am
Secretary of State
03-21-2006 90049 014 ****61.25

DOCUMENT # 729121

1. Entity Name

EXPERIMENTAL AIRCRAFT ASSOCIATION, PENSACOLA, FLORIDA, CHAPTER 485, INCORPORATED

Principal Place of Business	Mailing Address
9750 AILERON AVE (FERGUSON AIRPORT) PENSACOLA FL 32506 US	4104 LONGWOOD CIRCLE GULF BREEZE FL 32563 US

bbU1ZJUB

1st MOORE CR2E037 (10/05)

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 59-3256044 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCGOUN, ROBERT R PD
194 S CAMPBELLTON LANE
PENSACOLA FL 32506-5148

7. Name and Address of New Registered Agent

Name Randy Shelnut
Street Address (P.O. Box Number is Not Acceptable) 481 Ronda St
City Pensacola FL Zip Code 32534

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCGOUN, ROBERT R PD 194 S. CAMPBELLTON LANE PENSACOLA FL 32506-5148	☐ Delete	TITLE PD SC NAME STREET ADDRESS CITY-ST-ZIP	RANDY SHELNUT 481 RONDA ST PENSACOLA, FL 32534	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MALLORY, CHRIS VP 5026 JENNY LANE PENSACOLA FL 32507-8102	☐ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	CLIFFORD HILL 6396 BAY OAKS ST MILTON, FL 32563	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD JOHNSON, ARDELL K STD 4104 LONGWOOD CIRCLE GULF BREEZE FL 32561-8500	☐ Delete	TITLE STD NAME STREET ADDRESS CITY-ST-ZIP	ARDELL K JOHNSON 4104 LONGWOOD CIR GULF BREEZE	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: Ardell K. Johnson 3-2-06 1-850-934-6261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #