2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# 747513

Entity Name: E.A.A. 635, OF DELAND, FLORIDA, INC.

Current Principal Place of Business:

1725 OLD NDB HWY
DELAND, FL 32721

New Principal Place of Business:

Current Mailing Address:

1725 OLD NDB HWY
DELAND, FL 32721

New Mailing Address:

FEI Number: 59-2589636 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHEELER, JOHN W TREASUR
215 CITATION AVE
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	VICKERS, VAN	
Address:	20 SACKETT RD	
City-St-Zip:	DEBARY, FL 32713	
Title:	T	( ) Delete
Name:	WHEELER, JOHN W	
Address:	215 CITATION AVE	
City-St-Zip:	DELTONA, FL 32738	
Title:	DIR	( ) Delete
Name:	FRANKENBERRY, DONALD	
Address:	4605 S. TOMOKA DRIVE	
City-St-Zip:	DELEON SPRINGS, FL 32130	
Title:	DIR	( ) Delete
Name:	MOSELEY, BEAR	
Address:	392 CADDIE DR.	
City-St-Zip:	DEBARY, FL 327134513	
Title:	DIR	( ) Delete
Name:	ROBINSON, TOM	
Address:	P.O. BOX 740022	
City-St-Zip:	ORANGE CITY, FL 32774	
Title:	VP	( ) Delete
Name:	BAKULA, MIKE	
Address:	1113 PEARL STREET	
City-St-Zip:	DELAND, FL 327206545	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DIR	(X) Change ( ) Addition
Name:	MORSE, CECIL	
Address:	800 FREEMAN'S FARMS ROAD	
City-St-Zip:	DELAND, FL 32720	
Title:	DIR	(X) Change ( ) Addition
Name:	WEEMS, HERBRT	
Address:	1010 TENTH ST	
City-St-Zip:	HOY HILL, FL 32117	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	ROWE, DAVID	
Address:	900 MARY AVE	
City-St-Zip:	HOLLY HILL, FL 32117	

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: JOHN WHEELER TREA 01/13/2009

Electronic Signature of Signing Officer or Director — Date