

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760213

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** CHAPTER 724 OF THE EXPERIMENTAL AIRCRAFT ASSOCIATION, INC.

**Current Principal Place of Business:**

900 AIRPORT ROAD  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

**Current Mailing Address:**

900 AIRPORT ROAD  
MERRITT ISLAND, FL 32952

**New Mailing Address:**

**FEI Number:** 59-3578060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITE, DONALD L  
755 VENETIAN WAY  
MERRITT ISLAND, FL 32953 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: TD  
Name: REPASS, JACK  
Address: 941 PINELAND DR.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: SVD  
Name: REPASS, JACK L  
Address: 941 PINELAND DR.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP  
Name: WHITE, DON  
Address: 755 VENETIAN WAY  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: PD  
Name: WHITE, DON  
Address: 755 VENETIAN WAY  
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: JACK L. REPASS

TD

05/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date