

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000325

FILED  
Apr 18, 2009  
Secretary of State

**Entity Name:** EXPERIMENTAL AIRCRAFT ASSOCIATION, CHAPTER 193, INC.

**Current Principal Place of Business:**

4001 PINTO RD  
MIDDLEBURG, FL 32068 US

**New Principal Place of Business:**

**Current Mailing Address:**

5171 CHARLEMAGNE RD  
JACKSONVILLE, FL 32210 US

**New Mailing Address:**

**FEI Number:** 59-3699670

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BURBRIDGE, BEN  
5171 CHARLEMAGNE RD  
JACKSONVILLE, FL 32210 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: DP ( ) Delete  
Name: SHIRLEY, MILFORD  
Address: 4001 PINTO RD  
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: DV ( ) Delete  
Name: PHILLIPS, RICHARD  
Address: 1196 CROSSWINDS DR  
City-St-Zip: GREENCOVE SPRINGS, FL 32043

Title: DT ( ) Delete  
Name: DOBBIN, KENNETH  
Address: 3731 WESTOVER RD  
City-St-Zip: ORANGE PARK, FL 32003

Title: DS ( ) Delete  
Name: NEWMAN, JOHN  
Address: 3174 RIVER ROAD NORTH  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: FISCHER, SAM  
Address: 10566 OTTER CREEK DR  
City-St-Zip: JACKSONVILLE, FL 32222 US

Title: DV (X) Change ( ) Addition  
Name: SHIRLEY, MILFORD  
Address: 4001 PINTO RD  
City-St-Zip: MIDDLEBURG, FL 32068

Title: DT (X) Change ( ) Addition  
Name: WANAMAKER, JOHN  
Address: 10969 N. RUNWAY CIRCLE  
City-St-Zip: GLEN ST. MARY, FL 32040

Title: DS (X) Change ( ) Addition  
Name: NORDSIEK, JEFF  
Address: 7954 LAVENDER LANE  
City-St-Zip: JACKSONVILLE, FL 32244

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: BEN BURBRIDGE

RA

04/18/2009

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

\_\_\_\_\_  
Date