2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000325

FILED Apr 05, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

855 ST JOHNS BLUFF RD 855 ST JOHNS BLUFF RD STE 4 SKYHARBOR STE 4

JACKSONVILLE, FL 32225 US JACKSONVILLE, FL 32225 US

Current Mailing Address: New Mailing Address:

855 ST JOHNS BLUFF RD 855 ST JOHNS BLUFF RD STE 4 SKYHARBOR STE 4

JACKSONVILLE, FL 32225 US JACKSONVILLE, FL 32225 US

FEI Number: 59-3699670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ELVIS, GOLDEN K 3023 HERRING RD

JACKSONVILLE, FL 32216 US

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

Name: OPEN, CHAIR

Address: 855 ST JOHNS BLUFF RD City-St-Zip: JACKSONVILLE, FL 32225

Title: DV

Name: GOLDEN, ELVIS Address: 855 ST JOHNS BLUFF RD

City-St-Zip: JACKSONVILLE, FL 32225

Title: DT

Name: GREER, RUSTY

Address: 855 ST JOHNS BLUFF RD City-St-Zip: JACKSONVILLE, FL 32225

Title: DS

 Name:
 MCCUISTON, KECIA

 Address:
 855 ST JOHNS BLUFF RD

 City-St-Zip:
 JACKSONVILLE, FL 32244

Title:

Name: TYLER, JACK

Address: 855 ST JOHNS BLUFF RD City-St-Zip: JACKSONVILLE, FL 32244

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: ELVIS K GOLDEN DV 04/05/2012