

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000570

FILED
Jun 29, 2005
Secretary of State

Entity Name: PARASTARS EAA ULTRALIGHT CHAPTER 113, INC.

Current Principal Place of Business:

6220 MANATEE AVE W, STE 401
BRADENTON, FL 34209

New Principal Place of Business:

PO BOX 52
BRADENTON, FL 34206-005 US

Current Mailing Address:

6220 MANATEE AVE W, STE 401
BRADENTON, FL 34209

New Mailing Address:

PO BOX 52
BRADENTON, FL 34206-005 US

FEI Number: 62-1842166 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ALFORD, J TERRY
6220 MANATEE AVE W, STE 401
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

KASPAR, GREGORY F
9993 LAUREL VALLEY AVE CIRCLE
BRADENTON, FL 34202 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: GREGORY F. KASPAR

06/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALFORD, J TERRY
Address: 6220 MANATEE AVE W, STE 401
City-St-Zip: BRADENTON, FL 34209

Title: VD () Delete
Name: HOCKER, WILLIAM
Address: 6820 ARBOR OAKS CIR
City-St-Zip: BRADENTON, FL 34209

Title: STD () Delete
Name: KASPAR, GREGORY F
Address: 6304 MILLSTONE DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: PD () Delete
Name: THOMPSON, JEFF D
Address: 3309 KORINA LN
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: KIMBLE, JACK
Address: 2836 ALSACE CT
City-St-Zip: ORLANDO, FL 32813

Title: D () Delete
Name: STUBBS, NEAL
Address: 929 OAKLAND DR
City-St-Zip: BRANDON, FL 35110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GREGORY F. KASPAR

STD

06/29/2005

Electronic Signature of Signing Officer or Director

Date