2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N02000007801

Entity Name: ISLAND FLYERS R/C CLUB, INC.

Current Principal Place of Business:

<UNUSED>
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

766 OLD AMELIA AVENUE
FERNANDINA BEACH, FL 32034 US

Current Mailing Address:

766 OLD AMELIA AVE.
FERNANDINA BEACH, FL 32034 US

New Mailing Address:

766 OLD AMELIA AVENUE
FERNANDINA BEACH, FL 32034 US

FEI Number: 56-2282818 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALL, JOHN W
766 OLD AMELIA AVE.
FERNANDINA BEACH, FL 32034 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: PD ( ) Delete
Name: WALL, JOHN W
Address: 766 OLD AMELIA AVENUE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: VP ( ) Delete
Name: NORTHRUP, KENNETH E
Address: 713 GIEGER RD.
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: TRES ( ) Delete
Name: REGOLI, BRUNO
Address: 2141 CIERA LANE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: SEC ( ) Delete
Name: JOHNSON, RONALD
Address: 2193 MELISSA RD.
City-St-Zip: YULEE, FL 32097 US

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
Name:
Address:
City-St-Zip:

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 W. WALL PD 01/12/2009
Electronic Signature of Signing Officer or Director — Date