2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009027

Entity Name: EAA CHAPTER 692 OF STUART, FL, INC.

Apr 11, 2007 Secretary of State

P.O. BOX 3017 406 W WHITNEY DR STUART, FL 349953017 JUPITER, FL 33458

Current Mailing Address: New Mailing Address:

P.O. BOX 3017 STUART, FL 349953017

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

STEWART, NANCY 865 SE FESTIVO COURT US PORT ST. LUCIE, FL 34983

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BENNETT, BOB STEWART, BILL Name: Name: Address: 524 N.E. SIERRA WAY Address: 524 N.E. SIERRA WAY City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: JENSEN BEACH, FL 34957

Title: () Delete Title: (X) Change () Addition

Name: D'ARCY, ED Name: LIVINGSTON, DANNY Address: 620 SW SALERNO ROAD Address: 406 W WHITNEY DR City-St-Zip: STUART, FL 34997 City-St-Zip: JUPITER, FL 33458 US

Title: () Delete Title: (X) Change () Addition

STEWART, NANCY Name: STEWART, NANCY Name: 865 SE FESTIVO CORUT Address: 865 SE FESTIVO CORUT Address: City-St-Zip: PORT ST LUCIE, FL 34983 City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: () Delete Title: (X) Change () Addition

LIVINGSTON, ELIZABETH Name: Name: DARCY, ED 406 W. WHTNEY DRIVE 620 SW SALERNO RD Address: Address: City-St-Zip: JUPITER, FL 34958 City-St-Zip: STUART L, FL 34997 US

Title: (X) Delete Title: () Change () Addition

LIVINGSTON, DAN Name: Name: 406 W WHITNEY DR Address: Address: City-St-Zip: JENSEN BEACH, FL 34958 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DANNY LIVINGSTON Ρ 04/11/2007