2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 10, 2005 DOCUMENT# N10961 Secretary of State

Entity Name: SOUTH SEMINOLE FLYING CLUB, INC.

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

414 TWISTING PINE CIR LONGWOOD, FL 327792634 US

Current Mailing Address: New Mailing Address:

SOUTH SEMINOLE FLYING CLUB INC PO BOX 917750 LONGWOOD, FL 327917750 US

FEI Number: 59-3326789 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:

HOFFBERG, ALAN M 414 TWISTING PINE CIR LONGWOOD, FL 327792634 US

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:

(X) Change () Addition () Delete YANESH, JOHN YANESH, JOHN VICE P Name: Name:

2346 MULLET LAKE PK RD Address: 2346 MULLET LAKE PK RD Address: City-St-Zip: GENEVA, FL 32732 US City-St-Zip: GENEVA, FL 32732 US

Title: () Delete Title: (X) Change () Addition HOFFBERG, ALAN M Name: HOFFBERG, ALAN M TREAS Name: Address: 414 TWISTIN PINE CIR Address: 414 TWISTIN PINE CIR City-St-Zip: LONGWOOD, FL 327792634 US City-St-Zip: LONGWOOD, FL 327792634 US

Title: () Delete Title: (X) Change () Addition THIGPEN, DAVID A MAINT MATTHIASSON, JOHANNES F Name: Name: 102 BRANDIWOOD CT Address: 9203 FOX QUARRY LN Address: City-St-Zip: SANFORD, FL 327734323 US City-St-Zip: DEBARY, FL 327132240 US

Title: DΛ () Delete Title: D/S (X) Change () Addition WALLACE, THOMAS J WALLACE THOMAS J SEC Name: Name: 220 FALLEN PALM DR Address: 220 FALLEN PALM DR Address: City-St-Zip: EUSTIS, FL 327369728 US City-St-Zip: EUSTIS, FL 327369728 US

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

GUNTER, DAN CLIMER, RONNIE PRES Name: Name:

921 CUTLER DR. 1561 KEVIN LN. Address: Address:

City-St-Zip: LONGWOOD, FL 32779 US City-St-Zip: DELAND, FL 327247920 US

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: ALAN M. HOFFBERG D/T 08/10/2005