2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# N10961

Entity Name: SOUTH SEMINOLE FLYING CLUB, INC.

Current Principal Place of Business:

414 TWISTING PINE CIR
LONGWOOD, FL 327792634 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3326789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOFFBERG, ALAN M
414 TWISTING PINE CIR
LONGWOOD, FL 327792634 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: P/D ( ) Delete
Name: YANESH, JOHN PRES
Address: 2346 MULLET LAKE PK RD
City-St-Zip: GENEVA, FL 32732 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ALAN M HOFFBERG TREA 04/26/2007

Electronic Signature of Signing Officer or Director — Date