

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11365

FILED  
Mar 27, 2009  
Secretary of State

**Entity Name:** GREATER MIAMI AVIATION ASSOCIATION, INC.

**Current Principal Place of Business:**

6355 NW 36TH ST, SUITE 600  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 660834  
MIAMI, FL 33266

**New Mailing Address:**

**FEI Number:** 59-2694879

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHMIDT, MICHAEL  
6355 NW 36ST  
STE 600  
MIAMI, FL 33166 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: D ( ) Delete  
Name: HENDERSON, MARC  
Address: MIAMI INTERNATIONAL AIRPORT  
City-St-Zip: MIAMI, FL 33102

Title: D ( ) Delete  
Name: SULLIVAN, DAN  
Address: 6355 NW 36 ST STE 600  
City-St-Zip: MIAMI, FL 33166

Title: T ( ) Delete  
Name: SCHMIDT, MICHAEL  
Address: 6355 NW 36 ST SUITE 600  
City-St-Zip: MIAMI, FL 33166

Title: P ( ) Delete  
Name: DAUN, STEVEN  
Address: 3814 CURTISS PKWY  
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: VP ( ) Delete  
Name: CHRISTIANSEN, ROBERT  
Address: 3814 CURTISS PKWY  
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: SEC ( ) Delete  
Name: DARNELL, DWAYNE  
Address: 6355 NW 36ST STE 600  
City-St-Zip: MIAMI, FL 33166

**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:

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: MICHAEL SCHMIDT

T

03/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date