2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11957

FILED Jan 05, 2009 Secretary of State

Entity Name: NAVAL AIRSHIP ASSOCIATION, INC.

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

2547 HYDE PARK RD 1182 WILD GINGER LANE (W) JACKSONVILLE, FL 32210 ORANGE PARK, FL 32003

Current Mailing Address: New Mailing Address:

1950 S.W. CYCLE STREET PORT SAINT LUCIE, FL 34953

FEI Number: 59-2485920 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ALLEN, GEORGE, W
2547 HYDE PARK RD
JACKSONVILLE, FL 32210 US
ALLEN, GEORGE, W
1182 WILD GINGER LANE (W)
ORANGE PARK, FL 32003 US

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: 01/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HINRICHSEN, MARGARET M Name: MORIN, FRED R
Address: 653 ALVARADO LANE Address: P.O. BOX 136

City-St-Zip: COTTONWOOD, AZ 86326 US City-St-Zip: NORWELL, MA 02061 US

 $\label{eq:Title:Title:S/T} {\sf Title:S/T} \qquad \qquad {\sf () Delete} \qquad \qquad {\sf Title:S/T} \qquad {\sf (X) Change () Addition}$

 Name:
 BROUWER, PETER F
 Name:
 BROUWER, PETER F

 Address:
 1950 SW CYCLE ST
 Address:
 1950 SW CYCLE ST

City-St-Zip: PORT SAINT LUCIE, FL 34953 US City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: P () Delete Title: () Change () Addition

 Name:
 SPAHR, HERMAN G
 Name:

 Address:
 1032 N. 21 ST. STREET
 Address:

 City-St-Zip:
 LAFAYETTE, IN 47904 US
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition Name: ALLEN, GEORGE W., Name: ALLEN, GEORGE W.,

Address: 2547 HYDE PARK RD. Address: 1182 WILD GINGER LANE (W)

City-St-Zip: JACKSONVILLE, FL 32210 US City-St-Zip: ORANGE PARK, FL 32210 US

Title: D () Delete Title: () Change () Addition

 Name:
 ASHFORD, ROBERT L
 Name:

 Address:
 389 HARVARD CT
 Address:

 City-St-Zip:
 NAPLES, FL 34104 US
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SMITH, DAVID R
 Name:

 Address:
 25 DEVON RD.
 Address:

 City-St-Zip:
 BLOOMINGTON, IL 61704 US
 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: PETER F. BROUWER S/T 01/05/2009