

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15333

FILED
Apr 29, 2009
Secretary of State

Entity Name: SUN 'N FUN FLY-IN, INC.

Current Principal Place of Business:

4175 MEDULLA ROAD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7670
LAKELAND, FL 338077670

New Mailing Address:

4175 MEDULLA ROAD
LAKELAND, FL 33811

FEI Number: 59-2803958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WENDEL, JOHN F
336 W HIGHLAND DR
SUITE 4
LAKELAND, FL 33813 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: CD () Delete
Name: EICKHOFF, WILLIAM A.
Address: 3522 PINEDALE DR
City-St-Zip: LAKELAND, FL 33811

Title: SD () Delete
Name: GARCIA, RICARDO
Address: 3650 DRANE FIELD RD
City-St-Zip: LAKELAND, FL 33811

Title: TD () Delete
Name: GARCIA, RICARDO
Address: 317 PARK BLVD
City-St-Zip: VENICE, FL 34285

Title: P () Delete
Name: BURTON, JOHN C
Address: 4175 MEDULLA ROAD
City-St-Zip: LAKELAND, FL 33811

Title: VCD () Delete
Name: KIMBALL, JIM
Address: PO BOX 849
City-St-Zip: ZELLWOOD, FL 32798

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: EICKHOFF, WILLIAM A
Address: 3522 PINEDALE DR
City-St-Zip: LAKELAND, FL 33811

Title: SD (X) Change () Addition
Name: BEATY, BOB
Address: 4175 MEDULLA RD
City-St-Zip: LAKELAND, FL 33811

Title: TD (X) Change () Addition
Name: GARCIA, RICARDO
Address: 3650 DRANE FIELD RD
City-St-Zip: LAKELAND, FL 33811

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: JOHN C. BURTON

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date