

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N18375 (8)
1. Corporation Name
RETIRED EASTERN PILOTS ASSOCIATION, INC.



Principal Place of Business % W.T. MALONE 774 LULLWATER RD. N.E. ATLANTA GA 30307-8238	Mailing Address % W.T. MALONE 774 LULLWATER RD. N.E. ATLANTA GA 30307-8238
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3. Date Incorporated or Qualified 12/22/1986	3a. Date of Last Report 01/30/1995
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-2748333	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent CT, CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KAYE, R.L. 11200 NW 53RD ST. CORAL SPRINGS FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PD Askin, R.J. 2234 Valencia Dr. Sarasota FL 34239 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ASKIN, R.J. 2234 VALENCIA DR SARASOTA FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	VD Johnson, D.E. 682 Sir Charles Dr. Fairburn GA 30213 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD RAWLS, D.B. 3777 TORREY PINES BLVD. SARASOTA FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	VD Kaye, R. L. 3696 N Hogan Dr. Goodyear AZ 85338 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MALONE, W.T. 774 LULLWATER RD NE ATLANTA GA ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	SD (same) ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BILLINGS, JM 4101 NELLIE CUSTIS CT ALEXANDRIA VA ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	TD (same) ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SORENSEN, K.P. P. O. BOX 754 N/A KEY LARGO FL ☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	D Brown, T. A. 107 Harbor Lake Cir. West Palm Beach FL ☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: W. T. Malone W. T. Malone 01/28/96 (404) 378-3504
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E037 (12/95)