

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27270

FILED
Jan 29, 2004
Secretary of State

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INC., CHAPTER #908

Current Principal Place of Business:

3100 INDUSTRIAL AVENUE, #3
FT. PIERCE, FL 34946 US

New Principal Place of Business:

Current Mailing Address:

3100 INDUSTRIAL AVENUE, #3
FT. PIERCE, FL 34946 US

New Mailing Address:

FEI Number: 65-0074948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSTH, EDWARD
439 SW FAIRWAY LK
PORT SAINT LUCIE, FL 34986

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 () Delete
Name: WETZEL, JAMES
Address: 1186 SE CLIFTON LN
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: D () Delete
Name: WILCOXSON, DOUGLAS D
Address: 5302 SUSAN LANE
City-St-Zip: FORT PIERCE, FL 34951

Title: VP () Delete
Name: KEMPER, ED
Address: 171 SE KESTER DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D () Delete
Name: FISHER, PAUL
Address: 5536 ALTMAN RD
City-St-Zip: FORT PIERCE, FL 34982

Title: T () Delete
Name: BOOTH, EDWARD
Address: 439 SW FAIRWAY LAKE
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D () Delete
Name: SQUEO, THOMAS
Address: 442 NW FERRIS DR
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: S (X) Change () Addition
Name: GROENDYKE, GERALD
Address: 5806 PAPAYA DRIVE
City-St-Zip: FORT PIERCE, FL 34982

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD BOOTH

T

01/29/2004

Electronic Signature of Signing Officer or Director

Date

ED ELDER DIRECTOR
309 GRANADA STREET
FORT PIERCE, FL 34949