## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N30874

FILED Jan 20, 2012 Secretary of State

Entity Name: HELICOPTER REUNION ALUMNI ASSOCIATION INC.

US

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

938 SATSUMA CIRCLE ST. JOHNS, FL 32259 US

Current Mailing Address: New Mailing Address:

938 SATSUMA CIRCLE ST. JOHNS, FL 32259

FEI Number: 59-2951555 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:

HOFFAY, EARL E MR.
938 SATSUMA CIRCLE..
ST. JOHNS, FL 32259 US
HOFFAY, EARL E PRESIDE
938 SATSUMA CIRCLE..
ST. JOHNS, FL 32259 US
ST. JOHNS, FL 32259 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: EARL E HOFFAY /S/ 01/20/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: HOFFAY, EARL E Address: 938 SATSUMA CIR. City-St-Zip: ST. JOHNS, FL 32259

Title: TD

Name: HOFFAY, BARBARA Address: 958 SATSUMA CIRCLE City-St-Zip: ST. JOHNS, FL 32259

Title: VP

 Name:
 LAVOOT, TED

 Address:
 2039 GAIL LANE

 City-St-Zip:
 ANAHIEM, CA 92802 US

Title: SD

Name: CHESTER, JIM Address: PO BOX 405

City-St-Zip: TALENT, OR 97540 US

I hereby 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 all other like empowered.

SIGNATURE: EARL E HOFFAY /S/ PRES 01/20/2012