

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31020

**FILED**  
**Mar 09, 2010**  
**Secretary of State**

**Entity Name:** CHAPTER 288 OF THE EXPERIMENTAL AIRCRAFT ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

4332 BEACONLIGHT RD.  
EDGEWATER, FL 32141 US

**New Principal Place of Business:**

**Current Mailing Address:**

4332 BEACONLIGHT RD.  
EDGEWATER, FL 32141 US

**New Mailing Address:**

**FEI Number:** 13-4233180

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, JACKIE B  
4332 BEACON LIGHT RD.  
EDGEWATER, FL 32141 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: TD  
Name: JOHNSON, JACKIE B  
Address: 4332 BEACONLIGHT RD.  
City-St-Zip: EDGEWATER, FL 32141

Title: D  
Name: PHILIPS, KEITH  
Address: 2641 SLOW FLIGHT DR  
City-St-Zip: DAYTONA BEACH, FL 32124

Title: S  
Name: LEDDA, GENE  
Address: 1978 SOUTHCREEK BLVD  
City-St-Zip: PORT ORANGE, FL 32128

Title: V  
Name: PLATT, STEVEN  
Address: 2004 COUNTRY CLUB DR  
City-St-Zip: PORT ORANGE, FL 32128

Title: T  
Name: HARTER, NILES L  
Address: 1892 ROYAL LATHAM CT.  
City-St-Zip: PORT ORANGE, FL 32128 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: JACKIE B. JOHNSON

TD

03/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date