

N31020

(Requestor's Name)

Dennis Powell
1804 Wiley Post Trl
Port Orange FL 32128-6756

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Change

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1/24/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CHAPTER 288 OF THE EXPERIMENTAL AIRCRAFT ASSOCIATION
Name of Corporation

DOCUMENT NUMBER: N31020

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DENNIS POWELL
Name of Contact Person

Firm/Company

1804 WILEY POST TRAIL
Address

PORT ORANGE, FL 32128
City/State and Zip Code

GODITTO@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DENNIS POWELL at (386) 256-4271
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CHAPTER 288 OF THE EXPERIMENTAL AIRCRAFT ASSOCIATION, INCORPORATION

2. The principal office address: 1809 WILEY POST TRAIL
PORT ORANGE, FL 32128

3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: N31020

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

JACKIE B JOHNSON
4332 BEACONLIGHT RD
EDGEWATER, FL 32141

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DENNIS POWELL
1809 WILEY POST TRAIL
PORT ORANGE, FL 32128

P.O. Box NOT acceptable

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DEPARTMENT OF STATE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Dennis Powell
Signature of an officer or director

DENNIS POWELL TREASURER, DIRECTOR
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Dennis Powell
Signature of Registered Agent

1/13/2014
Date

If signing on behalf of an entity:

DENNIS POWELL
Typed or Printed Name

*** FILING FEE: \$35.00 ***

CK #515

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314