2002 UNIFORM BUSINESS REPORT (UBR)

Mar 28, 2002 8:00 am **DOCUMENT # N36065 Secretary of State** 1. Entity Name 02-13-2002 90226 048 ****61.25 FLORIDA AIRPORT MANAGERS ASSOCIATION EDUCATIONAL FOUNDATION, INC. Principal Place of Business Mailing Address 108 EAST JEFFERSON ---4-747 7 (108 EAST JEFFERSON SUITE A TALLAHASSEE FL 32301-1702 TALLAHASSEE FL 32301-1702 2. Principal Place of Business 3. Mailing Address • Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3008375 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box ئ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COULTER, WILLIAM P. 108 EAST JEFFERSON TALLAHASSEE FL 32301 Zip Code 8. 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. william R SIGNATURE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to YLE NOW: FZE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE MESIDEUT Change STD (9/07 ☐ Addition NAME SOTORRIO, ANA EDVARD WUBLIER. NAME STREET ADDRESS STREET ADDRESS 479LE US I NORTH MIAMI INT'L AIRPORT, CON. E- 5TH FL CITY-ST-ZIP CITY-ST-ZIP ST. AUGUSTINE, FL 32095 MIAMI FL 33159 TITLE ☐ Delete TITLE Executive uce presument **K**) Change ☐ Addition WILLIAM A. Johnson 108. GAST JEFFERSOUST, STE, A NAME NAME COULTER, WILLIAM P STREET ADDRESS STREET ADDRESS 108 E. JEFFERSON ST., STE A CITY-ST-ZIP CITY-ST-7IP TAUAKASLEE, PL. SZZOI TALLAHASSEE FL 32301 TITLE ☐ Delete PPD -----TITLE PAGEPRESIDENT Change ■ Addition ANA SOTOREO -= NAME NAME - --SEALY, JERRY L STREET ADDRESS MIAMITENTY APPOPERICAL COURSE E-5th FL STREET ADDRESS STATE ROAD 85 CITY-ST-ZIP CITY-ST-ZIP Mani 1FL 33159 EGLIN A F B FL 32542 DILE TITLE Delete vice Prefident Change ☐ Addition MALIF NAME SHERRY, BILL BILL Sharry STREET ADDRESS 320 terminal Drive STREET ADDRESS 320 TERMINAL DRIVE CITY-ST-ZIP CITY-ST-ZIP allehanne Fi. 32315 TALLAHASSEE FL 33315 TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 makes empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplementa of the corporation or the receiver or tro-changed, or on an attachment with an a ess, with all other like empowered.

REQUIRED

OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

SIGNATURE:

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