2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # N94000004249 Mar 17, 2000 8:00 am Secretary of State AIRPORTS ASSOCIATION OF FLORIDA, INC. 03-17-2000 90048 012 ****70.00 Principal Place of Business Mailing Address 108 E. JEFFERSON ST., SUITE A 108 E. JEFFERSON ST., SUITE A TALLAHASSEE FL 32301-1540 TALLAHASSEE FL 32301 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3267136 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) COULTER, WILLIAM P 108 E. JEFFERSON ST., SUITE A TALLAHASSEE FL 32301 City Zip Code office or registered agent, or both, in the state of Florida 8. The above named entity e purc SIGNATURE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Change TITLE STD □ Delete TITLE ANA SOTORRIO LEWIS, RICHARD K NAME NAME MIAMI INT'L AIRPORT, CONCOURSE E- 5th fl. STREET ADDRESS STREET ADDRESS 2800 N W 20 TRAIL MIAMI, FL 33159 CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL 34972 TITLE ☐ Change ☐ Addition PD Delete TITLE NAME NAME BOWLING, FAYE H STREET ADDRESS STREET ADDRESS **150 NORTH ALACHUA STREET** CITY-ST-ZIP CITY-ST-ZIP LAKE CITY FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE EVD NAME NAME COULTER, WILLIAM P STREET ADDRESS STREET ADDRESS 108 EAST JEFFERSON ST. - SUITE A CITY-ST-ZIP CITY-ST-ZIP Tallahassee Fl Change ☐ Addition ☐ Delete TITLE TITLE VD. PPD PICCOLO, FREDRICK J NAME NAME STREET ADDRESS STREET ADDRESS 6000 AIRPORT CIRCLE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL PD Addition TITLE ☐ Delete TITLE NAME NAME SEALY, JERRY L STREET ADDRESS STREET ADDRESS STATE ROAD 85 CITY-ST-ZIP CITY-ST-ZIP EGLIN A F B FL 32542 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP d with this filin lify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 12. I hereby certify that the information ot aus d that my signature shall have the same legal effect as if made under oath; that I am an officer or director 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 supple of the corporation or the receichanged, or on an attachme

SIGNATURE;