**FILED** 

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## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Apr 09, 2002 8:00 am Secretary of State DOCUMENT # **N94000004250** 02-28-2002 90081 001 \*\*\*245.00 FLORIDA ASSOCIATION OF AIRPORTS, INC. Principal Place of Business Mailing Address 108 E. JEFFERSON ST., SUITE A 108 E. JEFFERSON ST., SUITE A TALLAHASSEE FL 32301 TALLAHASSEE FL 32301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3375687 Not Applicable Zip Country \_\_ Zip\_ Country . \$8.75 Additional 5. Certificate of Status Desired - -Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COULTER, WILLIAM P Street Address (P.O. Box Number is Not Acceptable) 108 E. JEFFERSON ST., SUITE A TALLAHASSEE FL 32301 City Zip Code 8. The above named entity submits this statement for the purgose of ing its registered office or registered agent, or both, in the state of Florida. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Ed Wullner President - DE Change (9/01) TIME Delete SOTORRIO, ANA NAME NAME 4796 U.S. 1, Norte IMIAMI INTERNATIONAL AIRPORT, CONCOURSE E STREET ADDRESS STREET ADDRESS st. Augustine, PL, 32095 CITY-ST-ZIP Miami Fl 33159 CITY-ST-ZIP PPO TITLE Delete TITLE EXECUTIVE VICE President ☐ Change Addition BOWLING, FAYE H NAME WILLIAM POHNSON 1088. Jegerson St. NAME 150 NORTH ALACHUA STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL CITY-ST-ZIP Tallohussee, Fl. 32300 EVO Secretary - Treadurer Poter moons 1000 chanberlan Plans វា៤೯ Delete TME ☐ Change **Addition** COULTER, WILLIAM P NAME NAME 108 E. JEFFERSON ST., SUITE A STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32301 CITY-ST-ZIP CITY-ST-ZIP 33913 ÆL TITLE Delete TITLE ☐ Change ☐ Addition PICCOLO, FREDRICK J NAME NAME 6000 AIRPORT CIR. STREET ADDRESS STREET ADDRESS Sarasota Fl CITY-ST-7IP CITY-ST-ZIP PPD TITLE Delete TITLE ☐ Change ☐ Addition SEALY, JERRY L NAME NAME STREET ADDRESS STATE ROAD 85 STREET ADDRESS CITY-ST-7IP EGLIN A F B FL 32542 CITY-ST-ZIP SID VICE PLUKALION TITLE ☐ Delete TITLE Channe Addition SHERRY, BILL NAME STREET ADDRESS 320 TERMINAL DRIVE STREET ADIDRESS FORT LAUDERDALE FL 33315 CITY-ST-71P CITY-ST-ZIP 12. I hereby certify that the information supplied with this films closs 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 eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all order like empowered.