

**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # N95000004841**

1. Entity Name  
EAA INTERNATIONAL AEROBATIC CLUB CHAPTER 98  
OF NAPLES, INC.



Principal Place of Business

715 10TH ST SOUTH  
NAPLES, FL 34102

Mailing Address

715 10TH ST SOUTH  
NAPLES, FL 34102



03142005 No Chg-NP CR2E037 (10/03)

4. FEI Number  
65-0625093

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

SUTTON, KERMIT S  
715 10TH ST SOUTH  
NAPLES, FL 34102

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	SUTTON, KERMIT S
STREET ADDRESS	715 10TH ST SOUTH
CITY-STATE-ZIP	NAPLES, FL 34102
TITLE	D
NAME	THALHEIMER, BRUCE B
STREET ADDRESS	4849 BERKELY DRIVE
CITY-STATE-ZIP	NAPLES, FL 34112
TITLE	D
NAME	BITTLE, TOM
STREET ADDRESS	1900 VIRGINIA AVE #1302C
CITY-STATE-ZIP	FORT MYERS, FL 33901

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000292776  
03/31/05-80056-008 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/05

Date

(239) 263-8333

Daytime Phone #