2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# N97000001202

Entity Name: VALKARIA AVIATION ASSOC. INC.

Current Principal Place of Business:

2880 GREENBROOKE STREET
VALKARIA, FL 32950

New Principal Place of Business:

Current Mailing Address:

2880 GREENBROOKE STREET
VALKARIA, FL 32950

New Mailing Address:

FEI Number: 59-3488670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IRVINE, ARTHUR
2301 OAKLYN STREET
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: IRVINE, ARTHUR
Address: 2301 OAKLYN ST
City-St-Zip: PALM BAY, FL 32907

Title: VD ( ) Delete
Name: SOLDINI, JAMES
Address: 1594 ELMHURST CIRCLE SE
City-St-Zip: PALM BAY, FL 32909

Title: TD ( ) Delete
Name: ROTGERS, GAIL
Address: 775 VALKARIA RD
City-St-Zip: MALABAR, FL 32950

Title: SD ( ) Delete
Name: CURTIN, JOSEPH J
Address: 156 DRISKELL ST NE
City-St-Zip: PALM BAY, FL 32907

Title: SAA ( ) Delete
Name: BOWMAN, STEVE
Address: 550 ESCARP;E ST. SE
City-St-Zip: PALM BAY, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR E. IRVINE MR 02/13/2009

Electronic Signature of Signing Officer or Director — Date