

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709357

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INC. CHAPTER 74

FILED
Apr 03, 2013
Secretary of State
CC5734332140

Current Principal Place of Business:

3614 E. AMELIA ST
ORLANDO, FL 32803

Current Mailing Address:

P. O. BOX 140571
ORLANDO, FL 32814 US

FEI Number: 90-0637543

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOSAR, ROBERT
2319 SPRINGS LANDING BLVD
LONGWOOD, FL 32779 US

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

Officer/Director Detail :

Title VP
Name WALTERS-PHILLIPS, BARBARA
Address 957 PREDMONT OAKS DR
City-State-Zip: APOPKA FL 32703

Title T
Name KOSAR, ROBERT
Address 2319 SPRINGS LANDING BLVD
City-State-Zip: LONGWOOD FL 32779

Title D
Name CARVETH, TOM
Address 5 WEST SPRUCE ST
City-State-Zip: ORLANDO FL 32804

Title D
Name BULL, CHUCK JR
Address 9238 BUTTONWOOD ST
City-State-Zip: ORLANDO FL 32825

Title P
Name THOMAS, JIM
Address 716 BALM OVAL RD
City-State-Zip: WINTER PARK FL 32789

Title D
Name VOGELPOHL, GREGORY
Address 935 PLATO AVE
City-State-Zip: ORLANDO FL 32809

Title SECRETARY
Name HOFFBURG, ALAN
Address 1198 DOUGLAS AV
City-State-Zip: ALTAMONTE SPRINGS FL

I hereby 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 all other like empowered.

SIGNATURE: ROBERT KOSAR

TREASURER

04/03/2013

Electronic Signature of Signing Officer/Director Detail

Date