

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000012259

**Entity Name:** WOMEN IN AVIATION, CENTRAL FLORIDA CHAPTER, INC.

**FILED**  
**Jan 27, 2022**  
**Secretary of State**  
**3699937614CC**

**Current Principal Place of Business:**

10093 HART BRANCH CIRCLE  
ORLANDO, FL 32832

**Current Mailing Address:**

10093 HEART BRANCH CIRCLE  
ORLANDO, FL 32832 US

**FEI Number: 84-1710008**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SPOLAR, LAURA  
10093 HART BRANCH CIRCLE  
ORLANDO, FL 32832 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: LAURA SPOLAR**

**01/27/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SPOLAR, LAURA  
Address        10093 HART BRANCH CIRCLE  
City-State-Zip: ORLANDO FL 32832

Title            VP  
Name            DATZ, JENNIFER  
Address        1734 W CARRIAGE DR  
City-State-Zip: TITUSVILLE FL 32796-1481

Title            SECRETARY  
Name            LYNCH, MADDI  
Address        7511 SOLSTICE CIRCLE  
                  APT 1318  
City-State-Zip: ORLANDO FL 32821

Title            TREASURER  
Name            SPOLAR, LAURA  
Address        10093 HART BRANCH CIRCLE  
City-State-Zip: ORLANDO FL 32832

Title            DIRECTOR  
Name            KENNEDY, BARBARA  
Address        4950 PINWOOD PLACE  
City-State-Zip: COCOA FL 32926

Title            DIRECTOR  
Name            SUZIE, SALYERS  
Address        3051 E LIVINGSTON ST.  
City-State-Zip: ORLANDO FL 32803

Title            DIRECTOR  
Name            RODRIGUEZ, KELSIE  
Address        9174 RED HAWK CT  
City-State-Zip: ORLANDO FL 32832-5637

Title            DIRECTOR  
Name            PERRIN, ANNA KAY  
Address        6007 FOLKSTONE LN  
City-State-Zip: ORLANDO FL 32822

*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: LAURA SPOLAR**

**PRESIDENT**

**01/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date