

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000008537

Entity Name: COLLEGE OF MISSIONARY AVIATION, INC.

Current Principal Place of Business:

7695 ROSE LANE
KEYSTONE HEIGHTS, FL 32656

Current Mailing Address:

P. O. BOX 1033
KEYSTONE HEIGHTS, FL 32656

FEI Number: 47-1994752

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUGGINS, TIMOTHY
7695 ROSE LANE
KEYSTONE HEIGHTS, FL 32656 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 PST
Name HUGGINS, TIMOTHY
Address 7695 ROSE LANE
City-State-Zip: KEYSTONE HEIGHTS FL 32356

Title SEC.
Name SMITH, FRANK D
Address 4636 SE 3RD PLACE
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title VP
Name HUGGINS, ROGER W
Address 6840 MANNING CEMETARY RD.
City-State-Zip: JACKSONVILLE FL 32234

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: TIMOTHY R. HUGGINS, PRES.

PRESIDENT

05/03/2015

Electronic Signature of Signing Officer/Director Detail

Date