

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000129374

**Entity Name:** TBM 700 OWNERS AND PILOTS ASSOCIATION, INC.

**Current Principal Place of Business:**

245 PICKETTS TRACE  
ACWORTH, GA 30101

**FILED**  
**Jan 27, 2021**  
**Secretary of State**  
**1903119634CC**

**Current Mailing Address:**

245 PICKETTS TRACE  
ACWORTH, GA 30101 US

**FEI Number: 20-1618146**

**Certificate of Status Desired: No**

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

AM&E SERVICES LLC  
801 NORTH MAGNOLIA AVENUE  
SUITE 201  
ORLANDO, FL 32803 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 DIRECTOR  
Name KAPLAN, DAVE  
Address 401 DOUGLAS ST STE 406  
City-State-Zip: SIOUX CITY IA 51101

Title DIRECTOR, PRESIDENT  
Name DUNSIRN, BRIAN  
Address 345 LAKE ROAD  
City-State-Zip: MENASHA WI 54952

Title DIRECTOR  
Name THOMPSON, STEVE  
Address 5201 N WALNUT ST  
City-State-Zip: MUNCIE IN 47303

Title CHAIRMAN  
Name SCOBEY, DAVID  
Address 2645 CLUBSIDE TERRACE  
City-State-Zip: ALPHARETTA GA 32408

Title DIRECTOR  
Name SOLANO, THOMAS  
Address 5210 BELFORT ROAD  
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR, TREASURER,  
SECRETARY  
Name JOHNSON, CAREY  
Address 701 SW F AVE  
City-State-Zip: LAWTON OK 73501

Title EXECUTIVE SECRETARY  
Name STANISTREET, MISTY  
Address 245 PICKETTS TRACE  
City-State-Zip: ACWORTH GA 30101

Title DIRECTOR  
Name KIEFFER, TOM  
Address 26350 N 106TH WAY  
City-State-Zip: SCOTTSDALE AZ 85255

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*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MISTY STANISTREET**

**EXECUTIVE DIRECTOR**

**01/27/2021**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR

Name            REUTER, DIERK

Address        4001 GULF SHORE BLVD  
607

City-State-Zip: NAPLES FL 34103