

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747513

Entity Name: E.A.A. 635, OF DELAND, FLORIDA, INC.**Current Principal Place of Business:**1579 NDB RD
DELAND, FL 32721**Current Mailing Address:**1579 NDB ROAD
DELAND, FL 32721 US**FEI Number:** 59-2589636**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WHEELER, JOHN WTREASUR
215 CITATION AVE
DELTONA, FL 32738 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	P
Name	MUSGROVE, JIM
Address	54 AZELEA DRIVE
City-State-Zip:	DEBARY FL 32713

Title	DIR
Name	ROBINSON, THOMAS
Address	1171 FIRST STREET
City-State-Zip:	ORANGE CITY FL 32763

Title	VP
Name	AULT, TOM
Address	2216 NCR 428
City-State-Zip:	OVIDA FL 32765

Title	T
Name	WHEELER, JOHN W
Address	215 CITATION AVE
City-State-Zip:	DELTONA FL 32738

Title	DIR
Name	MAZACK, KENNETH
Address	1585 BERESFORD AVE
City-State-Zip:	DELAND FL 32720

Title	DIRECTOR
Name	EASTLAKE, CHUCK
Address	6808 RUTTERS RD
City-State-Zip:	PORT ORANGE FL 32127

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: JOHN WHEELER**TREASURER****01/14/2020**

Electronic Signature of Signing Officer/Director Detail

Date