

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16012

FILED
Mar 31, 2009
Secretary of State

Entity Name: EAA CHAPTER 866, INC.

Current Principal Place of Business:

476 N. WILLIAMS AVE.
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

4570 US HWY 1
MIMS, FL 32754

New Mailing Address:

FEI Number: 59-2967998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILBERT, LAWRENCE
2002 MALINDA LN
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HILLMAN, DAN
Address: 5128 DORIAN AVE
City-St-Zip: ORLANDO, FL 32812

Title: D () Delete
Name: GILBERT, LAWRENCE
Address: 2002 MALINDA LANE
City-St-Zip: TITUSVILLE, FL 32796

Title: V () Delete
Name: SAMMIS, STU
Address: 3155 KNOX MCRAE DR
City-St-Zip: TITUSVILLE, FL 32780

Title: TD () Delete
Name: BIERMAN, LARRY
Address: 4570 US #1
City-St-Zip: MIMS, FL 32754

Title: SD () Delete
Name: CRANSTON, NEALE
Address: 2021 MALINDA AVE
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SILVA, ALBERTO
Address: 173 WINDSONG WAY
City-St-Zip: TITUSVILLE, FL 32780

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: CHARVET, BEN
Address: 3384 LIONEL RD.
City-St-Zip: MIMS, FL 32754

Title: TD (X) Change () Addition
Name: BIERMAN, LARRY
Address: 4570 US HIGHWAY 1
City-St-Zip: MIMS, FL 32754

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LAWRENCE GILBERT

D

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date