2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001016

Jan 17, 2010 Secretary of State

Entity Name: SOUTHEASTERN AIRPORT MANAGERS' ASSOCIATION EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8712 CASPIANA LANE 8712 CASPIANA LANE

N CHARLESTON, SC 29420 N CHARLESTON, SC 29420 US

Current Mailing Address: New Mailing Address:

8712 CASPIANA LANE 8712 CASPIANA LANE

N CHARLESTON, SC 29420 N CHARLESTON, SC 29420 US

FEI Number: 59-3269604 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MCCLELLAN, PARKER W MCCLELLAN, PARKER W JR.
ONE AIRPORT BLVD 4084 CONWAY PLACE CIRCLE
ORLANDO, FL 32827 US ORLANDO, FL 32812 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: PARKER W. MCCLELLAN, JR. 01/17/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: BIBB, TOMMY AAE

Address: ONE TERMINAL DRIVE - SUITE 501

City-St-Zip: NASHVILLE, TN 37214 US

Title:

Name: CLOW, MICHAEL AAE

Address: 3300 CAPITAL CIRCLE, SW - SUITE #1

City-St-Zip: TALLAHASSEE, FL 32310 US

Title:

Name: LANDGUTH, MIKE AAE

Address: 1001 AIRPORT DRIVE - SUITE 14 City-St-Zip: CHATTANOOGA, TN 37421 US

Title: ST

Name: BROCKMAN, SCOTT AAE

Address: 2491 WINCHESTER ROAD - SUITE 113

City-St-Zip: MEMPHIS, TN 38116 US

Title:

Name: MARRISON, WILLIAM AAE

Address: P.O. BOX 15600 City-St-Zip: KNOXVILLE, TN 37901 US

Title: D

Name: GRAY, JEFF AAE

Address: 11000 TERMINAL ACCESS ROAD - SUT 8671

City-St-Zip: FORT MYERS, FL 33913 US

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: TOMMY W. BIBB. A.A.E. D 01/17/2010