2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001016

Entity Name: SOUTHEASTERN AIRPORT MANAGERS' ASSOCIATION

EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

8712 CASPIANA LANE N CHARLESTON, SC 29420

Current Mailing Address:

8712 CASPIANA LANE

N CHARLESTON, SC 29420 US

FEI Number: 59-3269604 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCCLELLAN, PARKER WJR. 6300 WEST BAY PARKWAY PANAMA CITY, FL 32409 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

FILED Feb 02, 2013

Secretary of State

CC2074492866

Officer/Director Detail:

Title D Title VP

NameOLMSTEAD, JUDI AAENameCLOW, MICHAEL AAEAddress5500 INTERNATIONAL BLVD., #101Address100 HART FIELD ROADCity-State-Zip:CHARLESTON SC 29418City-State-Zip:MORGANTOWN WV 26505

Title D Title C

NameLANDGUTH, MIKE AAENameKELLY, GREG AAEAddressP. O. BOX 80001Address400 AIRWAYS DRIVECity-State-Zip:RDU AIRPORT NC 27623City-State-Zip: SAVANNAH GA 31408

Title SECRETARY Title DIRECTOR

Name GRAY, JEFF AAE Name COLEMAN, TONEY AAE

Address 11000 TERMINAL ACCESS ROAD - Address 400 AIRPORT ROAD

SUT 8671

City-State-Zip: FORT MYERS FL 33913 City-State-Zip: FAYETTEVILLE NC 28306

Title PRESIDENT Title DIRECTOR

Name BROWNE, CHRIS CM Name HOLLIWAY, CLAUDIA

Address P. O. BOX 17045 Address 5109 CYPRESS LAKE DRIVE

City-State-Zip: WASHINGTON DC 20041 City-State-Zip: LAKE PARK GA 31636

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

SIGNATURE: ROBERT BRAMMER

EXECUTIVE SECRETARY

02/02/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title CORRESPONDING SECRETARY

NameAPONE, PATRICIA AAENameBRAMMER, ROBERTAddress1100 JETPORT ROADAddress8712 CASPIANA LANE

City-State-Zip: MYRTLE BEACH SC 29577 City-State-Zip: NORTH CHARLESTON SC 29420