

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001016

Entity Name: SOUTHEASTERN AIRPORT MANAGERS' ASSOCIATION
EDUCATIONAL FOUNDATION, INC.**FILED**
Jan 09, 2015
Secretary of State
CC7794000761**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

Officer/Director Detail :

Title DIRECTOR
Name OLMSTEAD, JUDI AAE
Address 5500 INTERNATIONAL BLVD., #101
City-State-Zip: CHARLESTON SC 29418

Title DIRECTOR
Name KELLY, GREG AAE
Address 400 AIRWAYS DRIVE
City-State-Zip: SAVANNAH GA 31408

Title PRESIDENT
Name GRAY, JEFF AAE
Address 11000 TERMINAL ACCESS ROAD -
SUT 8671
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR
Name COLEMAN, TONEY AAE
Address 400 AIRPORT ROAD
1
City-State-Zip: FAYETTEVILLE NC 28306

Title DIRECTOR
Name BROWNE, CHRIS CM
Address P. O. BOX 17045
City-State-Zip: WASHINGTON DC 20041

Title DIRECTOR
Name APONE, PATRICIA AAE
Address 1100 JETPORT ROAD
City-State-Zip: MYRTLE BEACH SC 29577

Title CORRESPONDING SECRETARY
Name BRAMMER, ROBERT
Address 8712 CASPIANA LANE
City-State-Zip: NORTH CHARLESTON SC 29420

Title DIRECTOR
Name REISMAN, MICHAEL AAE
Address 61 TERMINAL DRIVE, SUITE 1
City-State-Zip: FLETCHER NC 28732

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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 C. BRAMMER**EXECUTIVE SECRETARY 01/09/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KING, DAVID
Address 10 S. 6TH STREET, SUITE 100
City-State-Zip: RICHMOND VA 23219

Title DIRECTOR
Name SHEARER, JENNIFER
Address 1891 9TH STREET
City-State-Zip: MOBILE AL 36608