

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005927

FILED
Apr 13, 2005
Secretary of State

Entity Name: EAA HEARTLAND CHAPTER 1240 INC

Current Principal Place of Business:

319 MINI RANCH RD.
SEBRING, FL 33870 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7882
SEBRING, FL 338720115 US

New Mailing Address:

319 MINI RANCH RD.
SEBRING, FL 33870 US

FEI Number: 65-0864629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNHART, JOE
319 MINI RANCH RD.
SEBRING, FL 33870 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: PD () Delete
Name: BARNHART, JOE
Address: 319 MINI RANCH RD.
City-St-Zip: SEBRING, FL 33870

Title: DV () Delete
Name: OWEN, RON
Address: 2905 NE LAKEVIEW DR
City-St-Zip: SEBRING, FL 33870

Title: SD () Delete
Name: LATHAM, BILL
Address: 1457 LAKE LOTELA DR
City-St-Zip: AVON PARK, FL 33825

Title: TRD () Delete
Name: VANDER PLOEG, BOB
Address: 833 DUANE PALMER BLVD
City-St-Zip: SEBRING, FL 33876

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: OWEN, RON
Address: 9700 PAYNE ROAD
City-St-Zip: SEBRING, FL 33875

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOE BARNHART

PD

04/13/2005

Electronic Signature of Signing Officer or Director

Date