FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 09, 2002 8:00 am P01000042142 Secrétary of State DOCUMENT # 1. Entity Name 07-09-2002 90019 012 ***550.00 HILL'S AERO LEASING, INC. Mailing Address Principal Place of Business 5655 BAILEY RD 5655 BAILEY RD MULLBERRY FL 33860 MULLBERRY FL 33860 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For City & State Mulberro Not Applicable Country \$8.75 Additional Certificate of Status Desired Fee Required - - 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HILL EARL P Street Address (P.O. Box Number is Not Acceptable) 5655 BAILEY RD **MULLBERRY FL 33860** Zip Code 8. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. **☆** Change ☐ Addition TITI F ☐ Delete TITI F HILL, EARL P NAME NAME 5655 BAILEY RD STREET ADDRESS STREET ADDRESS **MULLBERRY FL 33860** CITY-ST-ZIP CITY-ST-ZIP Mulberry Delete TITLE TITLE NAME HILL, ELLEN F NAME 5655 BAILEY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MULLBERRY FL 33860 ☐ Change -- ☐ Addition ☐ Delete TITLE NAME NAME HILL, TERRY L STREET ADDRESS 3592 YELLOW BIRD CT STREET ADDRESS CITY-ST-ZIP ST CLOUD FL 34772 CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE

13. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if with all other like empowered. changed, or on an attachment with an address

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

NAME

STREET ADDRESS

CITY-ST-ZIP

EARL P. HILL, President 7-2-02