

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000094651

FILED  
Feb 18, 2008  
Secretary of State

Entity Name: DAVE SCHROEDER AIRCRAFT SALES, INC.

## Current Principal Place of Business:

748 BAYTREE DRIVE  
TITUSVILLE, FL 32780

## New Principal Place of Business:

379 CHENEY HWY  
213  
TITUSVILLE, FL 32780

## Current Mailing Address:

748 BAYTREE DRIVE  
TITUSVILLE, FL 32780

## New Mailing Address:

379 CHENEY HWY  
213  
TITUSVILLE, FL 32780

FEI Number: 22-3967630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: SCHROEDER, DAVID A  
Address: 748 BAYTREE DRIVE  
City-St-Zip: TITUSVILLE, FL 32780

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: SCHROEDER, DAVID A  
Address: 379 CHENEY HWY 213  
City-St-Zip: TITUSVILLE, FL 32780

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A. SCHROEDER

PRES

02/18/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date