

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000007528

FILED
Mar 31, 2005
Secretary of State

Entity Name: AVIATION SYSTEMS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

270 SOUTH PACE BLVD
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

P O BOX 828
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 59-3221867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUTWELL, SHIRON W
825 BAYSHORE DRIVE #701
PENSACOLA, FL 32507 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: PT () Delete
Name: BOUTWELL, SHIRON W
Address: 825 BAYSHORE DR #701
City-St-Zip: PENSACOLA, FL 32507

Title: S () Delete
Name: SASSER, DONALD R JR
Address: 5200 MEDINA ROAD
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: SHIRON W. BOUTWELL

PT

03/31/2005

Electronic Signature of Signing Officer or Director

_____ Date