

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000029533

FILED
Apr 23, 2009
Secretary of State

Entity Name: FIRST COAST AEROSPACE, INC.

Current Principal Place of Business:

14821 YONGE DRIVE
JACKSONVILLE, FL 32229

New Principal Place of Business:

14600 YONGE DRIVE
SUITE 122
JACKSONVILLE, FL 32218

Current Mailing Address:

POST OFFICE BOX 18332
JACKSONVILLE, FL 32229

New Mailing Address:

14600 YONGE DRIVE
SUITE 122
JACKSONVILLE, FL 32218

FEI Number: 71-1028186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, MERRILL L
2346 INDIAN SPRINGS DRIVE
JACKSONVILLE, FL 32246 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: PCEO () Delete
Name: WOODS, MERRILL L
Address: 2346 INDIAN SPRINGS DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP () Delete
Name: CARTER, GILMER T III
Address: 292 MARYS DRIVE
City-St-Zip: WOODBINE, GA 31569

Title: STV () Delete
Name: STAMM, WARREN J
Address: 2346 INDIAN SPRINGS DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CARTER, GILMER T III
Address: 2346 INDIAN SPRINGS DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

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

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: MERRILL LEE WOODS

PCEO

04/23/2009

Electronic Signature of Signing Officer or Director

Date