

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005509

Entity Name: SCHAFER AEROSPACE, INC.**Current Principal Place of Business:**VIRGINIA SQUARE PLAZA
3811 NORTH FAIRFAX DRIVE
ARLINGTON, VA 22203**Current Mailing Address:**VIRGINIA SQUARE PLAZA
3811 NORTH FAIRFAX DRIVE
ARLINGTON, VA 22203 US**FEI Number:** 47-3508937**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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

Officer/Director Detail :

Title	VP
Name	CONNEL, MARK
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	VP
Name	FAIST, JAMES
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	DIRECTOR
Name	FERRIS, ELIZABETH
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	VP
Name	GREIMAN, DONALD
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	DIRECTOR, PRESIDENT/CEO
Name	KWASNIEWSKI, LANCE
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	SECRETARY
Name	RALLS, JEANNE
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	DIRECTOR
Name	SHABE, LEE
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

Title	TREASURER
Name	WIRTH, MICHAEL
Address	VIRGINIA SQUARE PLAZA 3811 NORTH FAIRFAX DRIVE
City-State-Zip:	ARLINGTON VA 22203

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL WIRTH**TREASURER****03/19/2019**

Electronic Signature of Signing Officer/Director Detail

Date