

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 370208

FILED  
Mar 06, 2008  
Secretary of State

Entity Name: AVIATION PROPELLERS INC.

## Current Principal Place of Business:

12970 PORT SAID RD  
OPA LOCKA, FL 33054

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 72  
OPA LOCKA, FL 33054 US

## New Mailing Address:

FEI Number: 63-0588831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACKSON, BARBARA L  
12970 PORT SAID RD  
OPA LOCKA, FL 33054 US

## Name and Address of New Registered Agent:

GAITHER, THOMAS P  
12970 PORT SAID RD  
OPA LOCKA, FL 33054 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: THOMAS GAITHER

03/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GAITHER, PAUL E  
Address: 11600 N.W. 14TH COURT  
City-St-Zip: PEMBROKE PINES, FL

Title: VP ( ) Delete  
Name: GAITHER, THOMAS P  
Address: 12970 PORT SAID ROAD  
City-St-Zip: OPA LOCKA, FL 33054

Title: SEC ( ) Delete  
Name: JACKSON, BARBARA L  
Address: 12970 PORT SAID ROAD  
City-St-Zip: OPA LOCKA, FL 33054

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: PAUL E GAITHER

P

03/06/2008

Electronic Signature of Signing Officer or Director

Date