## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 450163** 

Entity Name: SHOWALTER AVIATION SERVICES, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

400 HERNDON AVE.(ZIP 32803) 400 HERNDON AVE P.O. BOX 140753 ORLANDO, FL 328140753 ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

400 HERNDON AVE.(ZIP 32803) P.O. BOX 140753 P.O. BOX 140753 ORLANDO, FL 32814 ORLANDO, FL 328140753

FEI Number: 59-1515134 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBERT B. WHITE

225 E ROBINSON #620

ORLANDO, FL 32801 US

SUITE 240

WINTER PARK, FL 32789 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: ROBERT B WHITE 04/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

 Name:
 SHOWALTER, R. H.,
 Name:
 SHOWALTER, R. H.,

 Address:
 4511 N LANDMARK DR.
 Address:
 2072 ROBIN ROAD

 City-St-Zip:
 ORLANDO, FL
 32814

Title: S ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 KIMBALL, JANE S,
 Name:
 KIMBALL, JANE S,

 Address:
 POB 849/END-CEMETERY RD
 Address:
 5354 CEMETARY ROAD

 City-St-Zip:
 ZELLWOOD, FL
 00000,
 City-St-Zip:
 ZELLWOOD, FL
 32798

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT H SHOWALTER PTD 04/23/2007