2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2005 08:00 AM Secretary of State **DOCUMENT # 525635** 1. Entity Name LINDAIR INC. Principal Place of Business Mailing Address 1234 CLYDE JONES ROAD PO BOX 49857 LINDAIR INC. HANGER SARASOTA, FL 34230 US SARASOTA, FL 34243 US 04072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2003065 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LINDSAY, EDWARD H DO NOT WRITE 350 S SHORE DRIVE SARASOTA, FL 34234 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000316530 04/19/05-80072-821 150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE LINDSAY, DAVID B. NAME 350 S SHORE DRIVE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34234 TITLE LINDSAY, EDWARD H NAME 1341 HARBOR DR. STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edward H. Lindsay TYPER OR PRINTER NAME OF SIGNING OFFICER OR DIRECTOR

941/359-0472