

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762370

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: FLORIDA INTERNATIONAL AIR SHOW, INC.

## Current Principal Place of Business:

1133 BAL HARBOR BLVD.  
SUITE 1135  
PUNTA GORDA, FL 33950 US

## Current Mailing Address:

1133 BAL HARBOR BLVD.  
SUITE 1135  
PUNTA GORDA, FL 33950 US

## New Principal Place of Business:

1107 WEST MARION AVENUE  
SUITE 115  
PUNTA GORDA, FL 33950 US

## New Mailing Address:

P O BOX 512366  
PUNTA GORDA, FL 33951 US

FEI Number: 59-2289482      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARRARD, THOMAS  
520 E OLYMPIA AVE  
PUNTA GORDA, FL 33950 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

## OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete  
Name: GARRARD, THOMAS  
Address: 520 E OLYMPIA AVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: PD ( ) Delete  
Name: MCQUEEN, ROBERT  
Address: 1625 W MARION AVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD ( ) Delete  
Name: GERONIME, GENE  
Address: 2610 TARPON COVE #421  
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD ( ) Delete  
Name: DEPTULA, JEANETTE  
Address: 9400 PIPER ROAD  
City-St-Zip: PUNTA GORDA, FL 33982

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition  
Name: MCQUEEN, ROBERT  
Address: 1107 WEST MARION AVE, SUITE 115  
City-St-Zip: PUNTA GORDA, FL 33950

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEANETTE DEPTULA

TD

02/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date