2002 UNIFORM BUSINESS REPORT (UBR)

May 06, 2002 8:00 am Secretary of State 847278 DOCUMENT # 1. Entity Name 05-06-2002 90205 025 ***150.00 SHAW AERO DEVELOPMENT, INC. Principal Place of Business Mailing Address 3570 SHAW BOULEVARD 3570 SHAW BOULEVARD NAPLES FL 34104 NAPLES FL 34104 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 11-2062656 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WESTERMAN, F. GRANT Street Address (P.O. Box Number is Not Acceptable) 3570 SHAW BOULEVARD NAPLES FL 34117 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS.\$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) Chairman of the Board Change ☐ Addition TITLE Delete TITLE SHAW, JAMES Show, James NAME NAME 303 Eagle Creek Naples Florida 34113 **563 EAGLE CREEK DRIVE** STREET ADDRESS STREET ADDRESS NAPLES FL 34113 CITY-ST-7IP CITY-ST-ZIP ST Viće President ☐ Addition ☐ Delete TITLE SHAW, FRANCIA NAME NAME James Driscoll **563 EAGLE CREEK DRIVE** STREET ADDRESS STREET ADDRESS 1569 Nottingham <u>N</u>aples, FL 34109 NAPLES FL 34113 CITY-ST-ZIP TITLE ☐ Change -Addition ☐ Delete WESTERMAN, F. G. NAME Robert D. Patton 843 Fairlawn Court STREET ADDRESS 91 CYPRESS VIEW DRIVE STREET ADDRESS NAPLES FL 34113 CITY-ST-ZIP · CITY-ST-ZIP Marco Island, FL 34145 D ☐ Delete TITLE Change ☐ Addition TITLE John Bosch **GUERRERO, RAYMOND** NAME NAME 2852 VANDERHOFF DR. STREET ADDRESS STREET ADDRESS 524 Paule**y**y CITY-ST-ZIP WEST COVINA CA 91791 CITY-ST-ZIP Kettering, OH 45429 ☐ Change ☐ Addition ☐ Delete TITLE TITLE MUSHRUSH, ROY NAME NAME 51 256 27 73-1325 AWAKEA ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KAILUA-KONA HI 96745 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition CASTLE, VERNON NAME NAME 2320-A 103RD AVENUE STREET ADORESS STREET ADDRESS **BELLEVUE WA 98004**

13. Thereby 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 indicated 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 11 or Block 12 if changed, or on an attachment with an address; with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE REQUIRES Driscoll SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

239-304-1000

FILED