

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855276

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: GULFSTREAM AEROSPACE CORPORATION OF TEXAS

**Current Principal Place of Business:**

1500 C PERIMETER RD  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2206  
SAVANNAH, GA 31402

**New Mailing Address:**

FEI Number: 58-1354653

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LOMBARDO, JOSEPH T  
Address: 500 GULFSTREAM ROAD  
City-St-Zip: SAVANNAH, GA 31407

Title: SD ( ) Delete  
Name: BERMAN, IRA P  
Address: 500 GULFSTREAM ROAD  
City-St-Zip: SAVANNAH, GA 31407

Title: SVPF ( ) Delete  
Name: CLARE, DANIEL G  
Address: 500 GULFSTREAM ROAD  
City-St-Zip: SAVANNAH, GA 31407

Title: T ( ) Delete  
Name: FOGG, DAVID H  
Address: 2941 FAIRVIEW PARK DRIVE  
City-St-Zip: FALLS CHURCH, VA 22042

Title: AS ( ) Delete  
Name: HOUSE, MARGARET N  
Address: 2941 FAIRVIEW PARK DRIVE  
City-St-Zip: FALLS CHURCH, VA 22042

**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:

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

Title: AS (X) Change ( ) Addition  
Name: ASLAKSEN, JULIE P  
Address: 2941 FAIRVIEW PARK DRIVE  
City-St-Zip: FALLS CHURCH, VA 22042

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: IRA P. BERMAN

SD

04/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date