## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

## May 23, 2007 8:00 am **DOCUMENT # F00000003636** Secretary of State 05-23-2007 90028 007 \*\*\*550.00 VOUGHT AIRCRAFT INDUSTRIES, INC. Principal Place of Business Mailing Address 9314 WEST JEFFERSON BLVD. P. O. BOX 655907, M/S 49-35 DALLAS, TX 75211 DALLAS, TX 75265-5907 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05022007 Chg-P CR2E034 (12/06) Applied For City & State City & State 4. FEI Number 75-2884072 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FL 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) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 14, 2007 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEO TITLE Delete TITI F Change Addition DOTY, ELMER L NAME NAME STREET ADDRESS 9314 WEST JEFFERSON BLVD. STREET ADDRESS CITY-ST-ZIP Dallas, TX Ass+ SEC DALLAS, TX 75265 CITY-ST-ZIP TITI F Delete TITLE ☐ Change - Addition NAME WHITE, BRUCE W JR NAME dan falmer of Pennsylvania Ave NW, Suite 220 9314 WEST JEFFERSON BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75265 CITY-ST-ZIP 20004-2505 TRS TITLE ☐ Delete TITLE **Addition** HARGUS, WENDY G NAME NAME STREET ADDRESS 9314 WEST JEFFERSON BLVD. STREET ADDRESS CITY - ST-ZIP DALLAS, TX 75265 CITY-ST-ZIP TITLE ☐ Delete TITLE -Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Delete **Addition** TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME Are NO Suite 220 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 20004-2505 ston 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

**FILED**