2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005
Secretary of State

DOCUMENT# F01000004652

Entity Name: CAE USA, INC.

Current Principal Place of Business:

4908 TAMPA WEST BLVD
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

PO BOX 15000
TAMPA, FL 33684500

New Mailing Address:

FEI Number: 51-0311065 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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:	PGM	(X) Delete
Name:	FRANK, JOE LEE	
Address:	4908 TAMPA WEST BLVD	
City-St-Zip:	TAMPA, FL 33634	
Title:	D	( ) Delete
Name:	KATZ, D	
Address:	4908 TAMPA WEST BLVD	
City-St-Zip:	TAMPA, FL 33634	
Title:	P	( ) Delete
Name:	LENYO, JOHN	
Address:	4908 TAMPA WEST BLVD	
City-St-Zip:	TAMPA, FL	
Title:	S	( ) Delete
Name:	ALLMAND, DAVID C	
Address:	4908 TAMPA WEST BLVD	
City-St-Zip:	TAMPA, FL	
Title:	AT	( ) Delete
Name:	WHYTAS, TOM	
Address:	4908 TAMPA WEST BLVD.	
City-St-Zip:	TAMPA, FL 33634	
Title:	D	( ) Delete
Name:	CAMPBELL, D	
Address:	4908 TAMPA WEST BLVD	
City-St-Zip:	TAMPA, FL 33634	

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:	T	(X) Change ( ) Addition
Name:	ATKINSON, JOHN B	
Address:	4908 TAMPA WEST BLVD.	
City-St-Zip:	TAMPA, FL 33634	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN B. ATKINSON T 03/23/2005

Electronic Signature of Signing Officer or Director — Date