2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006599

FILED Jan 16, 2004 Secretary of State

Entity Name: LEECO AVIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 545 GREEN DOLPHIN DR., S. CAPE HAZE, FL 33946 **Current Mailing Address: New Mailing Address:** 545 GREEN DOLPHIN DR., S. CAPE HAZE, FL 33946 FEI Number: 91-1820714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPAMERICA, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: () Change () Addition BUECHLER, NANCY L Name: Name: 545 GREEN DOLPHIN DR., S. Address: Address: City-St-Zip: CAPE HAZE, FL 33946 US City-St-Zip: Title: CTD () Delete Title: () Change () Addition BUECHLER, R. LEE Name: Name: 545 GREEN DOLPHIN DR., S. Address: Address: CAPE HAZE, FL 33946 US City-St-Zip: 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: R. LEE BUECHLER MR. 01/16/2004