2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000534

Entity Name: RECTRIX AVIATION, INC.

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
730 BARNS AIRPORT HYANNIS, I	STABLE RD. MA 02601				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 310	MIAMI TRAIL A, FL 34243				
FEI Number:	01-0760314	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
HAUSCH, JAMES P 8191 NORTH TAMIAMI TRAIL STE. 210 SARASOTA, FL 34243 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/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () RUSSELL, THOM 8191 NORTH TA SARASOTA, FL	MIAMI TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () HAUSCH, JAMES 8191 NORTH TA SARASOTA, FL	MIAMI TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I CHILSON, KATH 8191 NORTH TA SARASOTA, FL	MIAMI TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I CAWLEY, RICHA 100 FARM ROAL SHERBORN, MA)	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES P. HAUSCH P 01/06/2006