## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000003198

Entity Name: BLACK DIAMOND AVIATION, INC.

Apr 11, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4210 WEST TAMPA BAY BOULEVARD 101 E KENNEDY BOULEVARD TAMPA, FL 33614

**SUITE 2100** 

TAMPA, FL 33602

**Current Mailing Address:** New Mailing Address:

4210 WEST TAMPA BAY BOULEVARD PO BOX 172117 TAMPA, FL 33614 TAMPA, FL 33672

FEI Number: 61-1452616 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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

## **OFFICERS AND DIRECTORS:**

Title: CCFO

ROTHMAN, ROBERT Name: PO BOX 172117 Address: City-St-Zip: TAMPA, FL 33672

Title: DVST

Name: ATWOOD, SCOTT PO BOX 172117 Address: TAMPA, FL 33672 City-St-Zip:

Title: SRVP

BEALE, CHARLES L Name: PO BOX 172117 Address: City-St-Zip: TAMPA, FL 33672

Title:

BUCHANAN, KIM Name: Address: PO BOX 172117 City-St-Zip: TAMPA, FL 33672

Title:

NOLAN, SHARON L Name: Address: PO BOX 172117 TAMPA, FL 33672 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: SHARON NOLAN AS 04/11/2012