## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F05000004057

Entity Name: AVIATION MAINTENANCE STAFFING, INC.

FILED Jun 29, 2009 Secretary of State

Current Dr	insinal Blass s	of Description	Navy Dain	nainal Diago of Businesse	
		or business:	New Prin	ncipal Place of Business:	
Current Mailing Address:			New Mail	New Mailing Address:	
C/O HOWARD A. PULSIFER 1100 N. WOOD DALE ROAD WOOD DALE, IL 60191 US			1100 N. V	C/O ROBERT J. REGAN 1100 N. WOOD DALE ROAD WOOD DALE, IL 60191 US	
FEI Number:	20-2466888	FEI Number Applied For ( )	FEI Number Not App	oplicable ( ) Certificate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and	nd 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.					
SIGNATUR		Signature of Registered Agent	<u> </u>	 Date	
Title: Name:	STORCH, DAVID	Pelete	Title: Name:	DNS/CHANGES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition	
Address: City-St-Zip:	1100 N. WOOD D WOOD DALE, IL		Address: City-St-Zip:	:	
Title: Name: Address: City-St-Zip:	PD () D ROMENESKO, TI 1100 N. WOOD D WOOD DALE, IL	ALE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S (X) E PULSIFER, HOW 1100 N. WOOD E WOOD DALE, IL	ALE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VT () D POULTON, RICHA 1100 N. WOOD D WOOD DALE, IL	ARD J DALE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () C COHEN, MICHAE 1100 N. WOOD D WOOD DALE, IL	ALE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () D REGAN, ROBERT 1100 N. WOOD D WOOD DALE, IL	ALE ROAD	Title: Name: Address: City-St-Zip:	VSD (X) Change ( ) Addition REGAN, ROBERT J 1100 N. WOOD DALE ROAD : WOOD DALE, IL 60191	

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT J. REGAN VSD 06/29/2009