

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007907

FILED
Apr 30, 2008
Secretary of State

Entity Name: DERCO AEROSPACE, INC.

Current Principal Place of Business:

8000 WEST TOWER AVE.
MILWAUKEE, WI 53223

New Principal Place of Business:

Current Mailing Address:

8000 WEST TOWER AVE.
MILWAUKEE, WI 53223

New Mailing Address:

FEI Number: 39-1344641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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: P () Delete
Name: OCHSNER, WILLIAM
Address: 8000 WEST TOWER AVE.
City-St-Zip: MILWAUKEE, WI 53223

Title: VP () Delete
Name: HOEHNNEN, MARK
Address: 8000 WEST TOWER AVE.
City-St-Zip: MILWAUKEE, WI 53223

Title: S () Delete
Name: HOPKO, KATHLEEN
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 06615

Title: T () Delete
Name: PIERPONT, RICHARD
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 06615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOEHNNEN, MARK
Address: 8000 WEST TOWER AVE.
City-St-Zip: MILWAUKEE, WI 53223

Title: VP (X) Change () Addition
Name: SEPULVEDA, JOHN
Address: 8000 WEST TOWER AVE.
City-St-Zip: MILWAUKEE, WI 53223

Title: S (X) Change () Addition
Name: GRABER-LIPPERMAN, PETER
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 06615

Title: T (X) Change () Addition
Name: CASWELL, RICHARD
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 06615

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: MARK HOEHNNEN

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date