FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400000251 (8)
1. Corporation Name

AERODROME GROUP, INC.

Principal Place of Business 7050 11TH AVE., SW ROCHESTER MN 55902

Mailing Address

7050 11TH AVE., SW ROCHESTER MN 55902

FILED Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

							3. Date Incorporated or Qualified 01/19/1994				
Principal Place of Business 2a. Mailing Address							4. FEI Number	7 1			
21	ace of Dosiliess	<u> </u>	ing Address				41-1764622		pplied For		
	Apt. #, etc. Suite, Apt. #, etc.						41*1704022		ot Applicable		
22	# ₁ &(C)	27					5. Certificate of Status Desired		Additional equired		
City & Stat	е	City	City & State				6. Election Campaign Financing	\$5.00	May Be		
23	T - 0	28					Trust Fund Contribution	Added	to Fees		
Zìp	Country				try	5. This corporation owes of has paid the current year thangible					
24	25 29 30										
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
MOSELEY, GEORGE T					81 Name						
OKALOOSA COUNTY AIRPORT STATE ROAD 85					82 Street Address (P.O. Box Number is Not Acceptable)						
					3						
ELGIN AIR FORCE BASE FL 32542					33						
				8	4	City	FL	85 Zip	Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE											
	Signature, typed or printed name of registered age				gent	t signature required	when reinstating) DATE				
12.	OFFICERS AND DIRECTORS 1:						ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12		
TITLE	DPST DELETE 1.1				•		[Change	Addition		
NAME	GARDNER, JOHN P				E				ļ		
STREET ADDRESS					1.3 STREET ADDRESS		ľ				
CITY-SI-ZIP	CHATFIELD MN 55923				-ST-	· ŽIP					
TITLE	DELETE 2.1 T				:			Change	☐ Addition		
NAME	2.2!				E			_			
STREET ADDRESS	ADDRESS 2.3				2.3 STREET ADDRESS						
CITY - ST - ZIP	1				- ST-						
TITLE	DELETE 3.1				_		[Change	Addition		
NAME	3.2						·				
STREET ADDRESS	· ·					DDRESS					
I				3.4. CITY		· I			į		
TITLE						- ZIP		Change	Addition		
NAME				4.1 TITLE		1	L	Change	TT YOULDIN		
STREET ADDRESS				4, 2 NAM 4,3 STREE	_	nnecer					
i											
CITY-ST-ZIP TITLE			☐ DELETE	4.4 CITY- 5.1 TITLE		ZIP	г.	Change	(data)		
NAME						ĺ	L	_ Glange	☐ Addition		
				5 2 NAME	-						
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CITY - ST - ZIP			Library	5.4 CITY-		ZIP					
TITLE			☐ DEFELE	6.1 TITLE			Ł	_! Change	☐ Addition		
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREE							
CITY-ST-ZIP				6.4 CITY-	ST-	ZIP					
14. I hereby c	ertify that the information supplied will on this appual report or supplemental	n inis tiling d	loes not qualify for	the exemp	ptio	on stated in Se	ection 119.07(3)(i), Florida Statutes. I further certi	fy that the	information		

4. I reredy certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I make appears in Block 12 or Block 13 if changed, or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report or supplemental annual report is true.

SIGNATURE:

WMMDE REQUOTED P. GARDNER

1/26/98

282-5757