

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001474

FILED  
Mar 10, 2004  
Secretary of State

Entity Name: HAWTHORNE AVIATION, INC.

## Current Principal Place of Business:

11600 AVIATION BLVD  
BLDG 11600  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 525  
WINSTON-SALEM, NC 27102

## New Mailing Address:

FEI Number: 57-0179100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, DARYL  
11600 AVIATION BLVD., 11600 BLDG.  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

SMOSNA, CHRISTOPHER A  
11600 AVIATION BLVD., 11600 BLDG.  
PALM BEACH GARDENS, FL 33410 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: CHRISTOPHER A. SMOSNA

03/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HARTON, T D  
Address: PO BOX 525  
City-St-Zip: WINSTON-SALEM, NC 27102

Title: VCFO ( ) Delete  
Name: URBANIA, M MARK  
Address: 2006 NEEDLE LEAF LN  
City-St-Zip: GREENSBORO, NC 27410

Title: SVP ( ) Delete  
Name: GROOM, RANDALL T  
Address: 3821 N. LIBERTY ST  
City-St-Zip: WINSTON SALEM, NC 271053965

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VCFO (X) Change ( ) Addition  
Name: LEVESQUE, STEVEN P  
Address: PO BOX 525  
City-St-Zip: WINSTON-SALEM, NC 27102

Title: SVP (X) Change ( ) Addition  
Name: BECKER, MARGUERITE  
Address: PO BOX 525  
City-St-Zip: WINSTON SALEM, NC 27102

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN P. LEVESQUE

VCFO

03/10/2004

Electronic Signature of Signing Officer or Director

Date