

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 11, 2005 8:00 am**  
**Secretary of State**

03-11-2005 90319 032 \*\*\*150.00

**DOCUMENT # F94000006013**

1. Entity Name  
**LEARJET INC.**



Principal Place of Business  
**ONE LEARJET WAY  
WICHITA, KS 67277-7707**

Mailing Address  
**P.O. BOX 7707  
ATTN:TAX DEPT.  
WICHITA, KS 67277-7707**

**50025119**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02172005

Chg-P

CR2E034 (10/03)

4. FEI Number  
**13-3567473**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
ZIEGLER, JAMES L  
8005 MEADOW PASS CT.  
WICHITA, KS 67205** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V/D  
Kanaley, M.S.  
One Learjet Way  
Wichita, KS 67209** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
BEAURIVAGE, ANNE G  
11842 ROLLING HILLS CT.  
WICHITA, KS 67212** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AT  
Garvey, Jonina R.  
One Learjet Way  
Wichita, KS 67209** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AT  
PUFAHL, DONALD R  
1652 S. TAMARISK CT.  
WICHITA, KS 67230** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AT/D  
Pufahl, Donald R.  
One Learjet Way  
Wichita, KS 67209** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CD  
BEAUDOIN, PIERRE  
757 LEXINGTON  
ILE DES SOEURS, QB, CA H3E-X2** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**C/D  
Beaudoin, Pierre  
400 Cote-Vertu West  
Dorval, QC, Canada H4S 1Y9** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
CRAWSHAW, CHRISTOPHER  
2407 N LAKE RIDGE CIRCLE  
WICHITA, KS 67205** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
Sequin, Jean  
400 Cote-Vertu West  
Dorval, QC, Canada H4S 1Y9** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AS  
CARLE, ROGER  
72 STRATHCONA  
VILLE MONT ROYAL QC, CN H3R1E4** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AS  
Carle, Roger  
800 Rene-Levesque Blvd West  
Montreal, QC, Canada, H3B 1Y8** ☒ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

*Jonina R. Garvey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/11/2005**

Date

**316-946-2000**

Daytime Phone #