
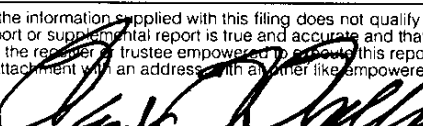


**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90206 006 \*\*\*150.00

<b>DOCUMENT # F95000001649</b>				04-20-2006 90206 006 ***150.00	
1. Entity Name <b>RAYTHEON AIRCRAFT COMPANY</b>					
Principal Place of Business <b>9709 E. CENTRAL WICHITA, KS 67206 US</b>		Mailing Address <b>PO BOX 85 WICHITA, KS 67201-0085 US</b>			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
6. Name and Address of Current Registered Agent <b>MASON, JOSEPH M JR. MCGEE &amp; MASON, P.A. 101 S. MAIN STREET BROOKSVILLE, FL 34605-1900</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE	VSD	<input type="checkbox"/> Delete			
NAME	WALLACE, WAYNE W				
STREET ADDRESS	9709 E. CENTRAL				
CITY- ST- ZIP	WICHITA, KS 67206				
TITLE	CD	<input type="checkbox"/> Delete			
NAME	SCHUSTER, JAMES E				
STREET ADDRESS	9709 E CENTRAL				
CITY- ST- ZIP	WICHITA, KS 67206				
TITLE	VD	<input type="checkbox"/> Delete			
NAME	O'BRIEN ANTHONY, F				
STREET ADDRESS	9709 E CENTRAL				
CITY- ST- ZIP	WICHITA, KS 67206				
TITLE	VPC	<input type="checkbox"/> Delete			
NAME	BERGER, JACKIE A				
STREET ADDRESS	9709 E. CENTRAL AVE.				
CITY- ST- ZIP	WICHITA, KS 67206				
TITLE	VP	<input type="checkbox"/> Delete			
NAME	BRAUNEIS, JOHN				
STREET ADDRESS	9709 E. CENTRAL AVE.				
CITY- ST- ZIP	WICHITA, KS 67206				
TITLE	VP	<input type="checkbox"/> Delete			
NAME	DOLANSKI, EDWARD P				
STREET ADDRESS	9709 E. CENTRAL AVE.				
CITY- ST- ZIP	WICHITA, KS 67206				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered 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 another like empowered.					
SIGNATURE:  3-22-06					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					