

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004270

Entity Name: AIRPARTS COMPANY, INC.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

2310 NW 55TH COURT
BAY 128
FT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9268
FT LAUDERDALE, FL 333109268 US

New Mailing Address:

FEI Number: 48-0782724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTIDORO, ANDREW W
111 SE 8TH AVE
APT 704
FORT LAUDERDALE, FL 33301 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: MAXWELL, MARTA E
Address: 111 S.E. 8TH AVE # 1702
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V () Delete
Name: MAXWELL, HERBERT G
Address: 111 S.E. 8TH AVE #1702
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S () Delete
Name: GALVAN, EMILISE B
Address: 912 S.E. 5TH CT
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD () Delete
Name: GARDNER, TERRY A
Address: 3315 COOL RIDGE
City-St-Zip: WICHITA, KS 57204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARTA E MAXWELL

PRES

02/24/2009

Electronic Signature of Signing Officer or Director

Date