2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# F96000006467

Entity Name: FLIGHTSAFETY INTERNATIONAL INC.

Current Principal Place of Business:

MARINE AIR TERMINAL
LA GUARDIA AIRPORT
FLUSHING, NY 11371

New Principal Place of Business:

Current Mailing Address:

MARINE AIR TERMINAL
LA GUARDIA AIRPORT
FLUSHING, NY 11371

New Mailing Address:

FEI Number: 13-3916524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: S ( ) Delete
Name: EFF, THOMAS A
Address: MARINE AIRTERMINAL-LA GUARDIA AIRPORT
City-St-Zip: FLUSHING, NY 111371 US

Title: T ( ) Delete
Name: D'ANGELO, MARIO
Address: MARINE AIR TERMINAL-LA GUARDIA AIRPORT
City-St-Zip: FLUSHING, NY 11371 US

Title: AS ( ) Delete
Name: D'ANGELO, MARIO
Address: MARINE AIR TERMINAL-LA GUARDIA AIRPORT
City-St-Zip: FLUSHING, NY 11371 US

Title: PD ( ) Delete
Name: WHITMAN, B N
Address: MARINE AIR TERMINAL-LA GUARDIA AIRPORT
City-St-Zip: FLUSHING, NY 11371 US

Title: EVP (X) Delete
Name: WAUGH, J S
Address: MARINE AIRTERMINAL-LA GUARDIA AIRPORT
City-St-Zip: FLUSHING, NY 11371 US

Title: CFO ( ) Delete
Name: MOTSCHWILLER, K W
Address: MARINE AIR TERMINAL-LA GUARDIA AIRPORT
City-St-Zip: FLUSHING, NY 11371

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:

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: MARIO D'ANGELO T 03/20/2009

Electronic Signature of Signing Officer or Director — Date