

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002864

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: GE ON WING SUPPORT, INC.

## Current Principal Place of Business:

300 EARHART COURT  
HEBRON, KY 41048

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2216  
SCHENECTADY, NY 123012216

## New Mailing Address:

FEI Number: 31-1464210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D ( ) Delete  
Name: ERNEST, SCOTT  
Address: 1 NEUMANN WAY  
City-St-Zip: CINCINNATI, OH 45215

Title: VD ( ) Delete  
Name: KRAATZ, RICHARD  
Address: 1 NEUMANN WAY  
City-St-Zip: CINCINNATI, OH 45215

Title: AS (X) Delete  
Name: WINGET, JAMES  
Address: 1 NEUMANN WAY  
City-St-Zip: CINCINNATI, OH 45215

Title: VAS ( ) Delete  
Name: CAMERON, BARBARA  
Address: 12 CORPORATE WOODS BLVD.  
City-St-Zip: ALBANY, NY 12211

Title: S ( ) Delete  
Name: TOLES, TYSON F  
Address: 1 NEUMANN WAY  
City-St-Zip: CINCINNATI, OH 45215

Title: D ( ) Delete  
Name: FITZGERALD, WILLIAM A  
Address: 1 NEUMANN WAY  
City-St-Zip: CINCINNATI, OH 45215

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition  
Name: KRAATZ, RICHARD  
Address: 1 NEUMANN WAY  
City-St-Zip: CINCINNATI, OH 45215

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

Title: VP (X) Change ( ) Addition  
Name: CAMERON, BARBARA  
Address: 12 CORPORATE WOODS BLVD.  
City-St-Zip: ALBANY, NY 12211

Title: S (X) Change ( ) Addition  
Name: TOLES, TYSON  
Address: 4636 SOMERTON ROAD  
City-St-Zip: TREVOSE, PA 19053

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: WILLIAM FITZGERALD

D

04/15/2008

Electronic Signature of Signing Officer or Director

Date