2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004512

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

NORWAY,

MESHEL, ROBERT E

() Delete

44 MONTGOMERY ST., STE. 1800

SAN FRANCISCO, CA 94104

Entity Name: HYDRO ALUMINUM NORDISK AVIATION PRODUCTS, INC.

FILED Apr 30, 2008 Secretary of State

•				· - , · · · -			
Current Principal Place of Business:				New Principal Place of Business:			
	GE J KING BL	_VD					
SUITE 1 CAPE CAN	NAVERAL, FL	32920					
Current Mailing Address:				New Mailing Address:			
101 GEORGE J KING BLVD				155 S. LIMERICK ROAD			
SUITE 1 CAPE CANAVERAL, FL 32920				LIMERICK, PA 19468			
FEI Number: 95-4055525 FEI Number Applied For ()			FEI Nur	FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1201 HAYS		DE COMPANY 012525 US					
	named entity e of Florida.	submits this statement for the	e purpose c	of changing i	ts registere	d office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	C (VIGELAND, TO N-3081 HOMES NORWAY,			Title: Name: Address: City-St-Zip:		(X) Change()Addition I, JOHN B VN COLONY PARKWAY SVILLE, VA 23116	
Title: Name: Address: City-St-Zip:	HARRIS, STEV 101 GEORGE) Delete EN J KING BLVD., STE. 1 :RAL, FL 32920		Title: Name: Address: City-St-Zip:	VD GORDON, I 155 S. LIME LIMERICK,	ERICK ROAD	
Title: Name:	T (CLAUSEN, TER			Title: Name:	VTD JACOBS, C	(X) Change () Addition . JEFFREY	

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

LIMERICK, PA 19468

LEYDEN, JAMÉS J

155 S. LIMERICK ROAD

LIMERICK, PA 19468

(X) Change () Addition

SIGNATURE: C. JEFFREY JACOBS VTD 04/30/2008