

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F99000003313

Entity Name: LAGRANGE AERO, INC.

FILED  
Oct 21, 2004  
Secretary of State

## Current Principal Place of Business:

2277 AIRPORT BLVD.  
PENSACOLA, FL 32504

## New Principal Place of Business:

5902 NORTH 9TH AVENUE  
PENSACOLA, FL 32504

## Current Mailing Address:

506 NEW FRANKLIN RD.  
LAGRANGE, GA 30240

## New Mailing Address:

FEI Number: 58-1685372      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAGUNDES, JOSEPH M  
2277 AIRPORT RD.  
PENSACOLA, FL 32504      US

## Name and Address of New Registered Agent:

FAGUNDES, JOSEPH M PRES.  
5902 NORTH 9TH AVENUE  
PENSACOLA, FL 32504      US

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: JOSEPH M FAGUNDES III

10/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FAGUNDES, J M  
Address: 856 PINEY WOODS DR  
City-St-Zip: LAGRANGE, GA

Title: VSD (X) Delete  
Name: FAGUNDES, BETTY E  
Address: 856 PINEY WOODS DR  
City-St-Zip: LAGRANGE, GA

Title: CEO (X) Delete  
Name: FAGUNDES JR, J M  
Address: 856 PINEY WOODS DR  
City-St-Zip: LAGRANGE, GA

Title: TD (X) Delete  
Name: ELLIS, DEBORAH  
Address: 2701 BELLE CHRISTIANE CIRCLE  
City-St-Zip: PENSACOLA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FAGUNDES, JOSEPH M III  
Address: 506 NEW FRANKLIN ROAD  
City-St-Zip: LAGRANGE, GA 30240

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 for the exemption stated in Section 119.07(3)(i), 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: JOSEPH M FAGUNDES III

PRES

10/21/2004

Electronic Signature of Signing Officer or Director

Date