2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G51248

Address:

933 BARDENIA DR

City-St-Zip: DELRAY BEACH, FL 33483

Entity Name: BOCA AIRCRAFT OWNERS INC

FILED Jan 08, 2009 Secretary of State

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|---|--|--|---|---|--|--|
| Current Principal Place of Business: | | | New Princi | New Principal Place of Business: | | |
| 1651 NW BOCA RA | 1ST CRT TON, FL 3343 | 2 | | | | |
| Current Mailing Address: | | | New Mailin | New Mailing Address: | | |
| 1651 NW BOCA RA | 1ST CRT TON, FL 3343 | 2 | | | | |
| FEI Number: 59-2005207 FEI Number Applied For () | | | FEI Number Not Applic | FEI Number Not Applicable () Certificate of Status Desired () | | |
| Name and | l Address of C | Current Registered Agent: | Name and A | Address of New Registered Agent: | | |
| FAIRMAN, 1651 NW BOCA RA | | 2 US | | | | |
| | e named entity e of Florida. | submits this statement for the | e purpose of changing its | s registered office or registered agent, or both, | | |
| SIGNATU | RE: | | | | | |
| | Electror | nic Signature of Registered A | gent | Date | | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | | |
| Title: Name: Address: City-St-Zip: | DOVE, LEISA 7248 BRUNSW |) Delete /ICK CIRCLE ACH, FL 33437 | Title: Name: Address: City-St-Zip: | ()Change()Addition | | |
| Title: Name: Address: City-St-Zip: | PD (WHITTLE, HAR 1239 N W 16TH BOCA RATON, | H STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D () RILEY, DONAL 133 SW BROTI LAKE CITY, FL | HERS LN | Title: Name: Address: City-St-Zip: | ()Change ()Addition | | |
| Title: Name: Address: City-St-Zip: | PANOCK, AND | GARDENS CIR N | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: | TD () SCHREPP, HA |) Delete RRIET | Title: Name: | TD (X) Change () Addition SCHREPP, HARRIET | | |

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.

Address:

933 GARDENIA DR

City-St-Zip: DELRAY BEACH, FL 33483

SIGNATURE: HARRY E. WHITTLE PD 01/08/2009