2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H27498

1. Entity Name
COMPOSITE AIRCRAFT DESIGNS, INC.

Principal Place of Business	Mailing Address
3900 DOW RD STE. J MELBOURNE, FL 32934 US	3900 DOW RD STE. J MELBOURNE, FL 32934 US

DO NOT WRITE IN THIS SPACE

01152004   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-2551543	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

THOMPSON JR., HARRY B.
100 HURST RD., NE.
PALM BAY, FL 32907-8515

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	PS	
NAME	THOMPSON, HARRY B. (JR.)	
STREET ADDRESS	100 HURST RD., NE	
CITY-ST-ZIP	PALM BAY, FL 32907	
TITLE		
NAME		
STREET ADDRESS		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Harry B. Thompson_   4/20/04   321-254-7300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #