

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J18747

FILED
Apr 14, 2009
Secretary of State

Entity Name: SHADY INTERNATIONAL AIRPORT, INC.

Current Principal Place of Business:

2710 SW 86 PLACE
OCALA, FL 34476 US

New Principal Place of Business:

Current Mailing Address:

2710 SW 86 PLACE
OCALA, FL 34476 US

New Mailing Address:

FEI Number: 59-2775605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZURAWSKI, JOSEPH
3504 SW 85TH ST
OCALA, FL 34476 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: VP () Delete
Name: MUNROE, STEVE
Address: 3476 SW 85 ST.
City-St-Zip: OCALA, FL 34476

Title: S () Delete
Name: EYSTER, JAMES
Address: 3555 SW 87TH PL
City-St-Zip: OCALA, FL 34476

Title: P () Delete
Name: KEITH, DAVID
Address: 3140 SW 86 PLACE
City-St-Zip: OCALA, FL 34476

Title: T () Delete
Name: ZURAWSKI, JOSEPH
Address: 3504 SW 87TH ST
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MUNROE, STEVE
Address: 3476 SW 85 ST.
City-St-Zip: OCALA, FL 34476

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

Title: VP (X) Change () Addition
Name: MANSFIELD, BARRY
Address: 2875 SE 34TH ST
City-St-Zip: OCALA, FL 34471

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: JOSEPH ZURAWSKI

T

04/14/2009

Electronic Signature of Signing Officer or Director

Date