

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K59410 (6)

1. Corporation Name
AEROJET, INC.

Principal Place of Business

Mailing Address

5098 NW 37TH AVE
SUITE 8
TAMARAC FL 33309
US

P.O. BOX 5006
FT. LAUDERDALE FL 33310
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/19/1989

4. FEI Number

59-2932460

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 3867 Southern Blvd

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

West Palm Beach

Florida

24 Zip

Country

29 Zip

Country

33406

USA

30 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARMAGOST, GEORGE
831 LYONS ROAD APT 23201
COCONUT CREEK FL 33063

81 Name

David A. O'Donnell

82 Street Address (P.O. Box Number is Not Acceptable)

1681 Woodbridge Lakes Circle,

83

84 City

West Palm Beach

FL

85 Zip Code

33406

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

David A. O'Donnell

(NOTE: Registered Agent signature required when reinstating)

04/13/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ARMAGOST, GEORGE
STREET ADDRESS 831 LYONS ROAD APT 23201
CITY-ST-ZIP COCONUT CREEK FL

1.1 TITLE President
1.2 NAME David A. O'Donnell
1.3 STREET ADDRESS 1681 Woodbridge Lakes Cir.
1.4 CITY-ST-ZIP West Palm Beach, FL 33406

TITLE ST
NAME \$94
STREET ADDRESS 831 LYONS ROAD APT 23201
CITY-ST-ZIP COCONUT CREEK FL

2.1 TITLE V. President
2.2 NAME Dana W. O'Donnell
2.3 STREET ADDRESS 1681 Woodbridge Lakes Cir.
2.4 CITY-ST-ZIP West Palm Beach FL 33406

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 registered or proposed registered agent empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *David A. O'Donnell*

04/15/98 04:32:11

CR2E034 (10/97)