2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002180

FILED Apr 30, 2008 Secretary of State

Entity Name: CHARLOTTE COUNTY AIRPORT TENANTS ASSOCIATION, INC.

| Current Principal Place of Business: | | | New Princi | New Principal Place of Business: | |
|--|---|--|--|---|--|
| | RGINIA AVE. DRDA, FL 339 | 950 | | | |
| Current Mailing Address: | | | New Mailin | New Mailing Address: | |
| 212 W. VIRGINIA AVE. PUNTA GORDA, FL 33950 | | | C/O DAROL H.M. CARR 99 NESBIT STREET PUNTA GORDA, FL 33950 | | |
| FEI Number: 65-1084230 FEI Number Applied For () | | | FEI Number Not Applie | cable () Certificate of Status Desired () | |
| Name and | Address of C | current Registered Agent: | Name and | Address of New Registered Agent: | |
| CARR, DAROL H.M. 28000 AIRPORT RD, BOX A-28 PUNTA GORDA, FL 33982 US | | | 99 NESBIT | CARR, DAROL H.M. 99 NESBIT STREET PUNTA GORDA, FL 33950 US | |
| | named entity : e of Florida. | submits this statement for the p | urpose of changing its | s registered office or registered agent, or both, | |
| SIGNATUR | RE: | | | 04/30/2008 | |
| | Electror | ic Signature of Registered Age | nt | Date | |
| OFFICERS | S AND DIREC | TORS: | ADDITIONS | S/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | DP () O'HALLORAN, 400 SORRENT PUNTA GORDA | O COURT | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () DEUTSH, JIM 25442 ST. HEL PUNTA GORDA | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | ROSE, NED 3724 PEACE R | Delete IVER DRIVE ITTE, FL 33983 | Title: Name: Address: City-St-Zip: | ST (X) Change () Addition ROSE, NED 3724 PEACE RIVER DRIVE PORT CHARLOTTE, FL 33983 | |
| Title: Name: Address: City-St-Zip: | GOIN, JERRY | Delete DURSE BOULEVARD A, FL 33982 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D CARR, DANA V 12280 MARYLA PUNTA GORDA | AND AVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () TURNER, BILL 28000 AIRPOR PUNTA GORDA | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NED ROSE ST 04/30/2008