

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008924

FILED
Mar 01, 2008
Secretary of State

Entity Name: LAUREL HILL R/C FLYERS, INC

Current Principal Place of Business:

4568 TOP FLIGHT DRIVE
CRESTVIEW, FL 32539 US

New Principal Place of Business:

Current Mailing Address:

4568 TOP FLIGHT DRIVE
CRESTVIEW, FL 32539 US

New Mailing Address:

FEI Number: 20-5790006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIFFARD, JAMES G
4568 TOP FLIGHT DRIVE
CRESTVIEW, FL 32539 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEAUSOLEIL, RICHARD
Address: 155 CONQUEST AVENUE
City-St-Zip: CRESTVIEW, FL 32536 US

Title: VP () Delete
Name: MEADE, RONALD L
Address: 6250 OLD BETHEL ROAD
City-St-Zip: CRESTVIEW, FL 32536 US

Title: S () Delete
Name: SWANSON, PAUL
Address: 3437 AUBURN ROAD
City-St-Zip: CRESTVIEW, FL 32539 US

Title: T () Delete
Name: GIFFARD, JAMES G
Address: 4568 TOP FLIGHT DRIVE
City-St-Zip: CRESTVIEW, FL 32539 US

Title: SC () Delete
Name: DUNEVANT, TONY
Address: 122 BRIAN DRIVE
City-St-Zip: CRESTVIEW, FL 32536 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEADE, RONALD
Address: 6250 OLD BETHEL ROAD
City-St-Zip: CRESTVIEW, FL 32536 US

Title: VP (X) Change () Addition
Name: MOYER, JOHN
Address: 410 DUVAL DRIVE
City-St-Zip: OPP, AL 36467 US

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

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

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

SIGNATURE: JAMES G. GIFFARD

T

03/01/2008

Electronic Signature of Signing Officer or Director

Date