

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 21, 2008
Secretary of State**

DOCUMENT# N06000012979

Entity Name: MISSION AIRE, CORP.

Current Principal Place of Business:

2609 SHELBY PARKWAY
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

2609 SHELBY PARKWAY
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 20-8085103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAUFFER, PAUL E
2609 SHELBY PARKWAY
CAPE CORAL, FL 33904 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: STAUFFER, PAUL E
Address: 2609 SHELBY PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: GEORGE, DON S
Address: 3034 LAKE BUTLER COURT
City-St-Zip: CAPE CORAL, FL 33909

Title: SEC () Delete
Name: STAUFFER, ANNE R
Address: 2609 SHELBY PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PAUL STAUFFER

PRES

01/21/2008

Electronic Signature of Signing Officer or Director

_____ Date