


FILED
Mar 03, 2008 8:00 am
Secretary of State

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DOCUMENT # N07000002392				03-03-2008 90204 016 ****61.25	
1. Entity Name LAKE PLACID AEROMODELERS INC.					
Principal Place of Business LAKE PLACID BLVD LAKE PLACID, FL 33852		Mailing Address 125 ROSEWOOD DR. N LAKE PLACID, FL 33852			
2. Principal Place of Business - No P.O. Box # 2010 PLACID LAKES BLVD		3. Mailing Address 1501 LAKE CLAY DR			
Suite, Apt. #, etc. LAKE PLACID, FL		Suite, Apt. #, etc. LAKE PLACID, FL			
City & State LAKE PLACID, FL		City & State LAKE PLACID, FL			
Zip 33852		Country HIGHLANDS		Zip 33852	
Country HIGHLANDS		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent SMITH, RICHARD D 125 ROSEWOOD DR. N LAKE PLACID, FL 33852				7. Name and Address of New Registered Agent Name WILLIAM H. SIDES Street Address (P.O. Box Number is Not Acceptable) 1501 LAKE CLAY DR. City LAKE PLACID FL 33852	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE WILLIAM H. SIDES DATE 2/29/08 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP P BURSON, DAVID A 24 EKHOFF LN. LAKE PLACID, FL 33852			TITLE NAME STREET ADDRESS CITY - ST - ZIP P/D		
TITLE NAME STREET ADDRESS CITY - ST - ZIP VP MILLER, BRIAN S 22 SUNSET LN. LAKE PLACID, FL 33852			TITLE NAME STREET ADDRESS CITY - ST - ZIP V/D		
TITLE NAME STREET ADDRESS CITY - ST - ZIP SEC RICHARD, SMITH D 125 ROSEWOOD DR. N LAKE PLACID, FL 33852			TITLE NAME STREET ADDRESS CITY - ST - ZIP S/D WILLIAM H. SIDES 1501 LAKE CLAY DR. LAKE PLACID, FL 33852		
TITLE NAME STREET ADDRESS CITY - ST - ZIP TRE BORTZ, DONALD J 107 CREST CT. LAKE PLACID, FL 33852			TITLE NAME STREET ADDRESS CITY - ST - ZIP T/D		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: WILLIAM H. SIDES S/D DATE 2/29/08 8634653594 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					