2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N29486

Entity Name: SANFORD AERO MODELERS INC.

Current Principal Place of Business:

C/O ROBERT LEE DARGUE
522 FULLER AVENUE
DELTONA, FL 32725 US

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT LEE DARGUE
522 FULLER AVENUE
DELTONA, FL 32725 US

New Mailing Address:

522 FULLER AVE.
DELTONA, FL 32725 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DARGUE, ROBERT LEE
522 FULLER AVENUE
DELTONA, FL 32725 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: D ( ) Delete
Name: DARGUE, ROBERT LEE
Address: 522 FULLER AVENUE
City-St-Zip: DELTONA, FL 32725 US

Title: P ( ) Delete
Name: SPAIN, PHILL
Address: 106 VENTURA DRIVE
City-St-Zip: SANFORD, FL 32773 US

Title: D ( ) Delete
Name: THOMSON, ROBERT
Address: 165 N. CLYDE AVENUE
City-St-Zip: LONGWOOD, FL 32750 US

Title: VP ( ) Delete
Name: GREEN, ROBERT
Address: 100 OAK VIEW PLACE
City-St-Zip: SANFORD, FL 32773 US

Title: D ( ) Delete
Name: DEGROOD, MICHAEL
Address: 3328 OAKMONT TERRACE
City-St-Zip: LONGWOOD, FL 32779 US

Title: D ( ) Delete
Name: HANNAH, DEREK
Address: 134 SPRINGHURST CIRCLE
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SPAIN, PHILL
Address: 106 VENTURA DRIVE
City-St-Zip: SANFORD, FL 32773 US

Title: D (X) Change ( ) Addition
Name: OSBORNE, JIM
Address: 247 LAKERIDGE CT.
City-St-Zip: WINTER SPRINGS, FL 32708 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:

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: LEE DARGUE RA 04/17/2009

Electronic Signature of Signing Officer or Director — Date