2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47694

FILED Apr 26, 2007 Secretary of State

Entity Name: SOUTH FLORIDA AEROSPACE SCHOLARSHIP CORPORATION

Current Principal Place of Business: New Principal Place of Business:

% STANLEY J. BODNER % STANLEY J. BODNER P.O. BOX 660466 4900 NW 36TH STREET MIAMI, FL 33266 MIAMI, FL 33122

Current Mailing Address: New Mailing Address:

% STANLEY J. BODNER P.O. BOX 660466 MIAMI, FL 33266

FEI Number: 65-0360264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI 201 S BISCAYNE BLVD 1500 MIAMI CENTER, STE 1500 TJM MIAMI, FL 33131 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BODNER, STANLEY J BODNER, STANLEY J Name: Name: PO BOX 660466 Address: 3400 PAN AMERICAN DRIVE-BOX 25 Address:

City-St-Zip: MIAMI, FL 33266 City-St-Zip: MIAMI, FL 33133

Title: VD Title: () Delete () Change () Addition

MURPHY, TIM Name: Name: Address: 201 S. BISCAYNE BLVD Address: City-St-Zip: MIAMI, FL City-St-Zip:

Title: () Delete Title: () Change () Addition

SCHUMACHER, BERNARD Name: Name: 9350 SW 124TH ST Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip:

Title: VΡ () Delete Title: (X) Change () Addition BENINTEZ, BENNY COLLIER, WALTER Name: Name: 12940 SW 74TH AVE Address: Address: 3841 SW 147TH AVE. - STE 102

City-St-Zip: MIAMI, FL 33156 City-St-Zip: MIAMI, FL 33185

Title: VD () Delete Title: () Change () Addition ROSSER, JOHN P

Name: Name: 104 CRANDON BLVD. Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 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: STANLEY J. BODNER PD 04/26/2007