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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Mar 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

SIGNATURE:

% EULAINE ERI

N95000001679 (8)

Mailing Address

% EULAINE ERI

3100 DURANGO RD

NATIONAL AEROSPACE FOD PREVENTION, INC.

3100 DURANGO RD. FT. WORTH TX 76118-4958 FT. WORTH TX 76116 3. Date Incorporated or Qualified 3a. Date of Last Report 04/07/1995 03/15/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3304092 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zin Country Zıp Country This corporation has liability for Intangible tax under s. 199.032, Yes Yes 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 **BURNWORTH, STACEY** Street Address (P.O. Box Number is Not Acceptable) 82 211 MCLEOD ST. 83 **MERRITT ISLAND FL 32953** City 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) Change Addition TITLE DELETE 1.1 TITLE PΩ SA WARNER ERI, C. EULAINE 1.2 NAME NAME P.O. BOX 3107 HSOF 12 1.3 STREET ADDRESS STREET ADDRESS LS0-288 SEA メナ NR CITY-ST-ZIP KSC FL 32815 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2 NITLE ERI EULAINE 22 NAMES NAME MCCORMICK, GAYLE # 341, MZ 6690, LHTAS 23 STREET ADDRESS DEPT. 34 P.O. BOX 482 N/A STREET ADDRESS WORTH, TX 76101 FORT WORTH TX 76101 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change 3.1 TITLE TITLE D WAGGONER DAUID YOUNKIN, ART 3.2 NAME NAME 100TH SW ST 3863 N. SAM HOUSTON PKWY 3200 STREET ADDRESS 3.3 STREET ADDRESS EVERETT WA 98204-1390 HOUSTON TX CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE CRAIG MANDEVILLERD SHOTE, WARDLOW RD NAME BELL, RICHARD 4. 2 NAME CRA16 F/A 18 SELF GOVERNANCE AIRCRAFT DVI 4.3 STREET ADDRESS STREET ADDRESS LONG BLK, CA 90807-5309 HAWTHORNE CA CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 7年のの人 BESSLER NAME HARTZELL, DARYL E 52 NAME NA P. O. BOX 68727 5.3 STREET ADDRESS STREET ADDRESS 173 INDUSTRY DRIVE 98168-0727 **シにみ ナナ ト だ** PITTSBURGH PA 15275 CITY-ST-7/P 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE WINGROUE GRAHAH MORSE, GEORGE 6.2 NAME NAME 130 DOUGLAS ST, STE 2305 ST BERNARD DRIVE STREET ADDRESS **6.3 STREET ADDRESS** 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

1817)560-2992 DERVIHEDEULAINE ERI 2-27-97 Daytime Phone # 0076307