2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001679

FILED Apr 22, 2004 Secretary of State

Entity Name: NATIONAL AEROSPACE FOD PREVENTION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
552 LAKE (W KENNEY GEORGE DR NE, FL 3294					
Current Mailing Address:			New Maili	New Mailing Address:		
552 LAKE (W KENNEY GEORGE DR NE, FL 3294					
El Number:	59-3304092	FEI Number Applied For ()	FEI Number Not App	icable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of Ne	w Registered Agent:	
MELBOUR	GEORGE DR NE, FL 3294	0 US				
	named entity of Florida.	submits this statement for the p	urpose of changing i	ts registered offi	ice or registered agent, or both	
SIGNATUR						
	Electro	nic Signature of Registered Age	ent		Date	
OFFICERS	AND DIREC	TORS:	ADDITION	S/CHANGES T	O OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	P (BELL, RICHAR ONE HORNET EL SEGUNDO	WAY	Title: Name: Address: City-St-Zip:	()0	Change () Addition	
Title: Name: Address: City-St-Zip:	D (ROY, WILLIE 4604 QUAILS FORT WORTH		Title: Name: Address: City-St-Zip:	V (X) C ROY, WILLIE 4604 QUAILS LAI FORT WORTH, T		
Fitle: Name: Address: City-St-Zip:	KENNEY, AND 9550 ASTRON		Title: Name: Address: City-St-Zip:	() C	Change () Addition	
Fitle: Name: Address: City-St-Zip:	OROSZ, ALEX SAN FRANCIS) Delete CO INTERNATIONAL AIRPORT CO, CA 94128	Title: Name: Address: City-St-Zip:	()0	Change () Addition	
Title: Name: Address: City-St-Zip:	HEIB, JOHN 6350 WALKER) Delete R LANE, SUITE 300 VA 223103241	Title: Name: Address: City-St-Zip:	() C	Change () Addition	
Fitle: Name: Address: City-St-Zip:	MANDEVILLE, 2401 E WARD) Delete CRAIG LOW RD C054-0044 CA 908075309	Title: Name: Address: City-St-Zip:	MANDEVILLE, CF	W RD C054-0044	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW KENNEY S 04/22/2004