

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004771

FILED
Jan 04, 2005
Secretary of State

Entity Name: FLORIDA AEROSPACE FINANCE CORPORATION

Current Principal Place of Business:

403 BREVARD AVE.
SUITE ONE
COCOA, FL 32922 US

New Principal Place of Business:

Current Mailing Address:

403 BREVARD AVE.
SUITE ONE
COCOA, FL 32922 US

New Mailing Address:

FEI Number: 59-3624635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, PHILIP R
403 BREVARD AVE., SUITE ONE
SUITE 129
COCOA, FL 32922 US

Name and Address of New Registered Agent:

THOMPSON, PHILIP R
403 BREVARD AVE., SUITE ONE
SUITE 1
COCOA, FL 32922 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:

01/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FANCHER, STEPHEN J
Address: 10400 NW 33RD STREET #200
City-St-Zip: MIAMI, FL 331725902

Title: D () Delete
Name: LAUBSCHER, LOUIS E
Address: 390 N. ORANGE AVE #1300
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: TOLLEY, JAMES
Address: 195 CHICORY AVENUE NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: DUNCAN, TOM
Address: 605 SUWANNEE STREET MS-46
City-St-Zip: TALLAHASSEE, FL 323990450

Title: D () Delete
Name: HORTON, JOHN W
Address: 215 SOUTH MONORE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: WALKER, SUSAN
Address: 50 NORTH LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BLAKESLEE, MARY HELEN
Address: 2001 THE CAPITOL
City-St-Zip: TALLAHASSEE, FL 32399

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: J. WILEY HORTON

D

01/04/2005

Electronic Signature of Signing Officer or Director

Date