2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000044042

1. Entity Name
BAIRD AIR, INC.

Principal Place of Business	Mailing Address
1301 S PATRICK DR SUITE 68 SATELLITE BEACH, FL 32937	405 TRINIDAD DRIVE SATELLITE BEACH, FL 32937

DO NOT WRITE IN THIS SPACE

04102008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-3649293	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BAIRD, RICHARD D
405 TRINIDAD DRIVE
SATELLITE BEACH, FL 32937

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

U00000910241
05/06/08-80036-013 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	BAIRD, RICHARD D
STREET ADDRESS	405 TRINIDAD DRIVE
CITY-ST-ZIP	SATELLITE BEACH, FL 32937

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-08   321) 794-9366
Date   Daytime Phone #