

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P00000056581

**FILED**  
**Feb 13, 2008**  
**Secretary of State****Entity Name:** DAVID AVIATION, INC.**Current Principal Place of Business:**107 INDUSTRIAL BLVD.  
PENSACOLA, FL 32505 US**New Principal Place of Business:****Current Mailing Address:**107 INDUSTRIAL BLVD.  
PENSACOLA, FL 32505**New Mailing Address:****FEI Number:** 59-3650317**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WALLS, R.CHRISTOPHER  
6137 WALNUT ST.  
PENSACOLA, FL 32503 US**Name and Address of New Registered Agent:**WALLS, R.CHRISTOPHER  
6137 WALTON ST.  
PENSACOLA, FL 32503 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

02/13/2008

Date

**OFFICERS AND DIRECTORS:****Title:** PRES ( ) Delete  
**Name:** WALLS, ROBERT C  
**Address:** 6049 SPANISH OAK DRIVE  
**City-St-Zip:** PENSACOLA, FL 32526**Title:** VP ( ) Delete  
**Name:** WALLS, R C  
**Address:** 6137 WALNUT ST  
**City-St-Zip:** PENSACOLA, FL 32503**Title:** VP ( ) Delete  
**Name:** WALLS, MARIANNE A  
**Address:** 6049 SPANISH OAK DRIVE  
**City-St-Zip:** PENSACOLA, FL 32526**Title:** VP ( ) Delete  
**Name:** WALLS, STEPHEN  
**Address:** 6049 SPANISH OAK DRIVE  
**City-St-Zip:** PENSACOLA, FL 32526**Title:** VP (X) Delete  
**Name:** WALLS, STEPHANIE  
**Address:** 6049 SPANISH OAK DRIVE  
**City-St-Zip:** PENSACOLA, FL 32526**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VP (X) Change ( ) Addition  
**Name:** WALLS, R C  
**Address:** 6137 WALTON ST  
**City-St-Zip:** PENSACOLA, FL 32503**Title:** SEC (X) Change ( ) Addition  
**Name:** WALLS, MARY A  
**Address:** 6049 SPANISH OAK DRIVE  
**City-St-Zip:** PENSACOLA, FL 32526**Title:** TREA (X) Change ( ) Addition  
**Name:** WALLS, JANAINA B  
**Address:** 6137 WALTON ST  
**City-St-Zip:** PENSACOLA, FL 32503**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** R. CHRISTOPHER WALLS

VP

02/13/2008

Electronic Signature of Signing Officer or Director

Date