

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000019026

Entity Name: LEE COUNTY AIR, INC.

FILED
Mar 31, 2008
Secretary of State

Current Principal Place of Business:

12541 METRO PKWY #21
FT. MYERS, FL 33966

New Principal Place of Business:

12541 METRO PKWY #22
FT. MYERS, FL 33966

Current Mailing Address:

12541 METRO PKWY #21
FT. MYERS, FL 33966

New Mailing Address:

12541 METRO PKWY #22
FT. MYERS, FL 33966

FEI Number: 37-1457865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, MICHAEL
12541 METRO PKWY #21
FT. MYERS, FL 33966 US

Name and Address of New Registered Agent:

ROSE, MICHAEL
12541 METRO PKWY #22
FT. MYERS, FL 33966 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: MICHAEL ROSE

03/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSE, MICHAEL
Address: 12541 METRO PKWY #21
City-St-Zip: FT. MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSE, MICHAEL
Address: 12541 METRO PKWY #22
City-St-Zip: FT. MYERS, FL 33966

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: MICHAEL ROSE

PRES

03/31/2008

Electronic Signature of Signing Officer or Director

Date