

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074165

FILED  
May 08, 2008  
Secretary of State

Entity Name: PRIMEPLANES AIRCRAFT SERVICES, INC.

## Current Principal Place of Business:

240 AVIATION DR N STE 102  
NAPLES, FL 34104

## New Principal Place of Business:

240 AVIATION DR N  
SUITE 102  
NAPLES, FL 34104

## Current Mailing Address:

240 AVIATION DR N STE 102  
NAPLES, FL 34104

## New Mailing Address:

240 AVIATION DR N  
SUITE 102  
NAPLES, FL 34104

FEI Number: 55-0838546

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOWLER WHITE BOGGS BANKER PA  
5811 PELICAN BAY BLVD.  
NAPLES, FL 34108 US

## Name and Address of New Registered Agent:

AARON A. FARMER, P.L.  
720 FIFTH AVENUE SOUTH  
SUITE 200  
NAPLES, FL 34102 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: AARON A. FARMER

05/08/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STURM, CARSTEN  
Address: 240 AVIATION DRIVE N #102  
City-St-Zip: NAPLES, FL 34104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: STURM, CARSTEN  
Address: 240 AVIATION DRIVE N #102  
City-St-Zip: NAPLES, FL 34104

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: CARSTEN STURM

PSTD

05/08/2008

Electronic Signature of Signing Officer or Director

Date