

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000101506

Entity Name: AIRE VALUE, INC

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

2024 W. GOVERNMENT ST
PENSACOLA, FL 32501

New Principal Place of Business:

2024 W. GOVERNMENT ST
PENSACOLA, FL 32502

Current Mailing Address:

2024 W. GOVERNMENT ST
PENSACOLA, FL 32501

New Mailing Address:

2024 W. GOVERNMENT ST
PENSACOLA, FL 32502

FEI Number: 20-0239975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKEY, RAYMOND G
913 GULF BREEZE PKWY
#5
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WARD, KEVIN
Address: 2024 W. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: WARD, DAVID S
Address: 2024 W. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: WARD, RYAN S
Address: 2024 W. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WARD, KEVIN
Address: 2024 W. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32502

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

Title: D (X) Change () Addition
Name: WARD, RYAN D
Address: 2024 W. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32501

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: KEVIN WARD

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date