2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123171

Title:

Name:

Address:

City-St-Zip:

T/D

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BOMBERGER, CAROLYN L

GAINESVILLE, FL 32605 US

2760 NW 26TH PLACE

Entity Name: SOUTHEAST AIRCRAFT CHARTER, INC.

FILED Mar 27, 2009 Secretary of State

		OT AIRCHAIL TOTAIRTEIN	ζ, πτο.				
Current Principal Place of Business:				New Principal Place of Business:			
	8TH AVENUE LLE, FL 32609	US					
Current Mailing Address:				New Mailing Address:			
	8TH AVENUE LLE, FL 32609	US					
FEI Number	: 20-1618915	FEI Number Applied For()	FEI Nun	nber Not Appl	licable ()	Certificate of Status De	esired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
2760 NW: GAINESVI The above in the State	e of Florida.	N L. US ubmits this statement for th	ne purpose o	f changing i	ts registered	l office or registered age	ent, or both,
SIGNATURE: Electronic Signature of Registered Agent						 Date	
Election Car		Trust Fund Contribution ().	- vgcm			Bate	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P/D () BOMBERGER, 0 2760 NW 26TH GAINESVILLE, F	PLACE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP/D () BOMBERGER, N 8012 120TH PL/ NEWCASTLE, V	ACE, SE		Title: Name: Address: City-St-Zip:	BOMBERGE 459 109TH A	(X) Change ()Addition R, MATTHEW A VENUE, SE WA 98004 US	
Title: Name: Address: City-St-Zip:	BOMBERGER, F	UN AVENUE, APT. 2211		Title: Name: Address: City-St-Zip:	BOMBERGE	(X) Change () Addition R, RACHEL A DOW PINE DRIVE 33647 US	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CAROLYN L. BOMBERGER PRES 03/27/2009

() Change () Addition