2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144965

Entity Name: NATIONAL AVIATION, INC.

DURAVA, DENNIS A

1815 STETSON DR.

CLEARWATER, FL 33765

Name:

Address:

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14402 AIRPORT PARKWAY CLEARWATER, FL 33762 US **Current Mailing Address: New Mailing Address:** 14402 AIRPORT PARKWAY CLEARWATER, FL 33762 US FEI Number: 20-3762001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLARK, RAY M JR 14402 ÁIRPORT PARKWAY CLEARWATER, FL 33762 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GAGLIANO, PAUL Name: Name: 12155 6TH ST. EAST Address: Address: City-St-Zip: TREASURE IS., FL 33706 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: BARNETT, THOMAS Name: 11223 WHEELING DR Address: Address: TAMPA, FL 33625 US City-St-Zip: City-St-Zip: () Delete Title: Title: TRES () Change () Addition CLARK, RAY M JR. Name: Name: 107 7TH ST Address: Address: City-St-Zip: BELLEAIR BEACH, FL 33786 US City-St-Zip: Title: SEC () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL GAGLIANO P 04/28/2009