

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000101716

FILED
Apr 03, 2008
Secretary of State

Entity Name: AERIAL PRODUCTS CORPORATION

Current Principal Place of Business:

617 HANNAH PARK LANE
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

813B FLIGHTLINE BLVD. #25
DELAND, FL 32724

Current Mailing Address:

617 HANNAH PARK LANE
ST. AUGUSTINE, FL 32095

New Mailing Address:

FEI Number: 26-0901135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONLEY, DENNIS
618 NORTH WILD OLIVE AVENUE
DAYTONA BEACH, FL 32118 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: PD () Delete
Name: HESS, KEVIN
Address: 617 HANNAH PARK LANE
City-St-Zip: ST. AUGUSTINE, FL 32095

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HESS, KEVIN M
Address: 617 HANNAH PARK LANE
City-St-Zip: ST. AUGUSTINE, FL 32095

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 M HESS

PD

04/03/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date