

P07000112561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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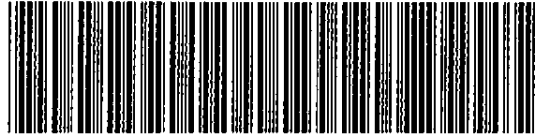
(Business Entity Name)

(Document Number)

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*RAC Charge  
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10-1-09*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Flight Information Technology, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P07000112561

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Terri Mermis  
Name of Contact Person

Flight Information Technology, Inc.  
Firm/Company

624 Sheridan Woods Drive  
Address

Melbourne, FL 32904  
City/State and Zip Code

tmermis@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Terri Mermis at ( 321 ) 420-9018  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2009

TERRI MERMIS  
FLIGHT INFORMATION TECHNOLOGY, INC.  
624 SHERIDAN WOODS DRIVE  
MELBOURNE, FL 32904

SUBJECT: FLIGHT INFORMATION TECHNOLOGY, INC.  
Ref. Number: P07000112561

We have received your document for FLIGHT INFORMATION TECHNOLOGY, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 609A00030368

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2009 SEP 28 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Flight Information Technology, Inc.
2. The principal office address: 624 Sheridan Woods Drive  
Melbourne, FL 32904
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/11/2007 Document number: P07000112561
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Business Filings Incorporated

1203 Governor's Square Blvd., Suite 101

Tallahassee, FL 32301-2960 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Terri Mermis

624 Sheridan Woods Drive

P.O. Box NOT acceptable

Melbourne, FL 32904

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Terri Mermis/Director  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

September 11, 2009  
Date

If signing on behalf of an entity:

Terri Mermis/Director  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)