2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20465

Entity Name: PIONEER AEROSPACE CORPORATION

FILED Apr 11, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
45 SOUTH SATELLITE ROAD SOUTH WINDSOR, CT 066740207				45 SOUTH SATELLITE ROAD SOUTH WINDSOR, CT 06074 US		
Current M	ailing Addres	ss:		New Maili	ing Address:	
45 SOUTH SATELLITE ROAD SOUTH WINDSOR, CT 066740207				45 SOUTH SATELLITE ROAD SOUTH WINDSOR, CT 06074 US		
FEI Number:	06-1240470	FEI Number Applied For()	FEI Nun	nber Not Appl	licable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:		Name and	Address of New Registered Agent:	
1201 HAYE TALLAHAS The above	ES STREET SSEE, FL 323		urpose o	f changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered Ager	nt		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P/D () DEHAAS, ERNI 45 SOUTH SAT SOUTH WINDS	ELLITE RD.		Title: Name: Address: City-St-Zip:	P/D (X) Change () Addition SMITH, JOHN 45 SOUTH SATELLITE RD. SOUTH WINDSOR, CT 06074	
Title: Name: Address: City-St-Zip:	D () FETU, JEAN-PI 45 SOUTH SAT SOUTH WINDS	ELLITE RD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LATHROP, JOH 45 S. SATELLI SOUTH WINDS	ΓE RD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FOLEY, WILLIA 45 SOUTH SAT			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PO-CHEDLEY, 45 SOUTH SAT			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	D () Change (X) Addition DEHAAS, ERNEST 45 SOUTH SATELLITE ROAD SOUTH WINDSOR, CT 06074 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.

SIGNATURE: ERNEST DEHAAS D 04/11/2008