2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 13, 2001 8:00 am **DOCUMENT # P93000056236** Secretary of State 1. Entity Name NO TORO AIRCRAFT, INC. 03-13-2001 90307 026 ***150.00 Mailing Address Principal Place of Business 3240 AIRFIELD DRDIVE EAST 3240 AIRFIELD DRIVE E HANGER #2 HANGER #2 LAKELAND FL 33811 LAKELAND FL 33811 LIS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3201390 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DURHAM, GEORGE A JR. Street Address (P.O. Box Number is Not Acceptable) 3902 WARING RD LAKELAND FL 33811 Zip Code City 8. 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11, Addition Change PD TITLE ☐ Delete TITLÈ VD-DURHAM, GEORGE A JR. NAME NAN.E DURHAM, GEORGE A.JR. STREET ADDRESS 3902 WARING ROAD STREET ADDRESS 3902 WARING RD CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33811 LAKELAND FL Change ☐ Addition ☐ Delete TITLE TITLE ₽D NAME DURHAM, HELEN NAME DURHAM, HELEN STREET ADDRESS 3902 WARING ROAD STREET ADDRESS 3902 WARING ROAD CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33811 33811 Lakeland, FL Addition. ☐ Change Delete - . TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS

13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Corge A. Durham, Jr. OR DIRECTOR