2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000068875

Entity Name: NORMAN AIRCRAFT LEASING, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

501 N HWY AIA 2041 VISTA CENTER

JUPITER, FL 33477 LEVEL 2 US

WEST PALM BEACH, FL 33411 US

Current Mailing Address: New Mailing Address:

501 N HWY AIA 2041 VISTA CENTER

JUPITER, FL 33477 US LEVEL 2

WEST PALM BEACH, FL 33411 US

FEI Number: 65-0440637 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SCHNEIDER, JACK SCHNEIDER, JACK 501 N HWY A1A 2041 VISTA CENTER

JUPITER, FL 33477 US LEVEL 2 WEST PALM BEACH, FL 33411 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: JACK SCHNEIDER 04/28/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition SCHNEIDER, JACK SCHNEIDER, JACK Name: Name:

501 N HWY A1A 2041 VISTA CENTER, LEVEL 2 Address: Address:

City-St-Zip: JUPITER, FL 33477 City-St-Zip: WPB, FL 33411

DVP Title: DVP Title: () Delete (X) Change () Addition NORMAN, GREG Name: NORMAN, GREG Name:

501 N HWY A1A 2041 VISTA CENTER, LEVEL 2 Address: Address:

JUPITER, FL 33477 WPB, FL 33411 City-St-Zip: City-St-Zip:

Title: Title: FVP () Delete **FVP** (X) Change () Addition COLLINS, BART COLLINS, BART Name: Name:

501 N HWY A1A 2041 VISTA CENTER, LEVEL 2 Address: Address:

City-St-Zip: JUPITER, FL 33477 City-St-Zip: WPB, FL 33411

Title: CONT () Delete Title: CONT (X) Change () Addition

DAVIS, WYNN DAVIS, WYNN Name: Name:

Address: 501 N. HWY A1A Address: 2041 VISTA CENTER, LEVEL 2 City-St-Zip: JUPITER, FL 33477

City-St-Zip: WPB, FL 33411

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: JACK SCHNEIDER S 04/28/2009