

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000013573

Entity Name: AIR GRECO, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

2011 S. PERIMETER ROAD
SUITE N
FT LAUDEDALE, FL 33309 US

New Principal Place of Business:

470 BRISCOE BOULEVARD
SUITE 201
LAWRENCEVILLE, GA 30045 US

Current Mailing Address:

470 BRISCOE BOULEVARD
SUITE 201
LAWRENCEVILLE, GA 30045 US

New Mailing Address:

FEI Number: 65-0658756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAX CO.
50 N. LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: RUPARD, ROBERT G
Address: 470 BRISCOE BOULEVARD, NE, SUITE 201
City-St-Zip: LAWRENCEVILLE, GA 30045 US

Title: VP/D () Delete
Name: MINTZ, CHARLES S
Address: 470 BRISCOE BOULEVARD, NE, SUITE 201
City-St-Zip: LAWRENCEVILLE, GA 30045 US

Title: S/D () Delete
Name: TAYLOR, CHARLES E
Address: 470 BRISCOE BOULEVARD, NE, SUITE 201
City-St-Zip: LAWRENCEVILLE, GA 30045 US

Title: T/D () Delete
Name: INGLE, LINDA
Address: 470 BRISCOE BOULEVARD, NE, SUITE 201
City-St-Zip: LAWRENCEVILLE, GA 30045 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES S. MINTZ

VP/D

05/01/2008

Electronic Signature of Signing Officer or Director

Date