

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

07 AUG 28 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08222007 Chg-P CR2E034 (12/06)

4. FEI Number **65-0740798** Applied For ☐ Not Applicable ☐

6. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # P97000021815

1. Entity Name
PRESIDENTIAL AVIATION, INC.

Principal Place of Business
**1725 NW 51 PLACE
FORT LAUDERDALE, FL 33309 US**

Mailing Address
**1725 NW 51ST PLACE
FORT LAUDERDALE, FL 33309 US**

2. Principal Place of Business - No P.O. Box #
**One Towne Square
Suite, Apt. #, etc.
Suite 1913
City & State
Southfield, MI
Zip
48076 Country
USA**

3. Mailing Address
**One Towne Square
Suite, Apt. #, etc.
Suite 1913
City & State
Southfield, MI
Zip
48076 Country
USA**

6. Name and Address of Current Registered Agent
**ENGLAND, NIGEL
1725 NW 51ST PLACE
FT LAUDERDALE, FL 33309**

7. Name and Address of New Registered Agent
**Name
CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road
City
Plantation FL Zip Code
33324**

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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE *Claudia L. Saar* **Claudia L. Saar**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **Asst. Secretary** **8/27/07**
DATE

FILE NOW!! FEE IS \$150.00 Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CBD HANSEN, STEPHEN J 10655 NE 4TH STREET, SUITE 300 BELLEVUE, FL 98004 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Seth S. Meltzer One Towne Square, Suite 1913 Southfield, MI 48076 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST ENGLAND, NIGEL 1725 N.W. 51ST PLACE FT LAUDERDALE, FL 33309 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Peter Sinatra One Towne Square, Suite 1913 Southfield, MI 48076 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Scott J. Seligman One Towne Square, Suite 1913 Southfield, MI 48076 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Seth S. Meltzer* **Seth S. Meltzer - Treasurer** **8-22-07** **248-862-8000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #