## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023186

Entity Name: PRINCESS AVIATION GROUP, INC.

**FILED** Mar 26, 2009 Secretary of State

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

1541 SE PALM COURT 1235 SE INDIAN STREET STUART, FL 34994

SUITE 102

STUART, FL 34997

**Current Mailing Address: New Mailing Address:** 

1541 SE PALM COURT 1235 SE INDIAN STREET STUART, FL 34994

SUITE 102

FEI Number Not Applicable ( )

STUART, FL 34997

FEI Number Applied For ( )

Certificate of Status Desired ( )

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

POST, LINDA M POST, LINDA M 1541 SE PALM COURT 1235 SE INDIAN STREET

SUITE 102 STUART, FL 34997 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: LINDA M POST 03/26/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

FEI Number: 65-0818740

STUART, FL 34994

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

POST, LINDA M Name: Name: POST, LINDA M

1541 SE PALM COURT 1235 SE INDIAN STREET, SUITE 102 Address: Address:

City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34997

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: LINDA M. POST **DPST** 03/26/2009