2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000042762

Entity Name: AEROEQUITY INC.

FILED Mar 30, 2009 Secretary of State

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

THREE SKIDAWAY VILLAGE SQUARE 15 LAKE STREET SAVANNAH, GA 31411

SUITE 235

SAVANNAH, GA 31411

Current Mailing Address: New Mailing Address:

15 LAKE STREET PO BOX 14160 SAVANNAH, GA 31416

SUITE 235

SAVANNAH, GA 31411

FEI Number: 58-2398967 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BDB AGENT CO 5355 TOWN CENTER ROAD SUITE 900 BOCA RATON, FL 33486 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ESTATE OF, BRIAN ROWE ESTATE OF, BRIAN ROWE Name: Name: 4 SUNRISE CAY 5 SOUTH RIVER ROAD Address: Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: SEWALLS POINT, FL 33486

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

HERNANDEZ, LINDA HERNANDEZ, LINDA Name: Name: 4 SUNRISE CAY 5 SOUTH RIVER ROAD Address: Address: KEY LARGO, FL 33037 SEWALL'S POINT, FL 33486 City-St-Zip: City-St-Zip:

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

DINSMORE, PENNY DINSMORE, PENNY Name: Name: 4 SUNRISE CAY 5 SOUTH RIVER ROAD Address: Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: SEWALL'S POINT, FL 33486

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

ROWE, DAVID H ROWE, DAVID H Name: Name: Address: THREE SKIDAWAY VILLAGE SQUARE Address: 15 LAKE STREET, SUITE 235 City-St-Zip: City-St-Zip: SAVANNAH, GA 31411 SAVANNAH, GA 31411

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: DAVID H ROWE MGR 03/30/2009