

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000100986

Entity Name: CLOUD DANCER AVIATION, INC.

FILED  
Oct 11, 2006  
Secretary of State

## Current Principal Place of Business:

1585 AVIATION CENTER PARKWAY, SUITE #900  
DAYTONA BEACH, FL 32114

## Current Mailing Address:

1585 AVIATION CENTER PARKWAY, SUITE #900  
DAYTONA BEACH, FL 32114

## New Principal Place of Business:

1585 AVIATION CENTER PARKWAY,  
SUITE 900  
DAYTONA BEACH, FL 32114

## New Mailing Address:

1585 AVIATION CENTER PARKWAY  
SUITE 900  
DAYTONA BEACH, FL 32114

FEI Number: 59-3546848

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIDD, SUSAN L  
441 S RIDGEWOOD AVE  
DAYTONA BEACH, FL 32114 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: SUSAN L. KIDD

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: D ( ) Delete  
Name: ALBER, DAVID L  
Address: 1585 AVIATION CENTER PKWY STE. #900  
City-St-Zip: DAYTONA BEACH, FL 32114

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ALBER, DAVID L SR  
Address: 1585 AVIATION CENTER PKWY STE. #900  
City-St-Zip: DAYTONA BEACH, FL 32114

I hereby certify that the information supplied with this filing does not qualify for the 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 L. ALBER SR.

DP

10/11/2006

Electronic Signature of Signing Officer or Director

Date