

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000078901

FILED
Jul 21, 2004
Secretary of State

Entity Name: AVIATION CONSULTING ENTERPRISES WORLDWIDE, INC.

Current Principal Place of Business:

2549 CYPRESS POINT CIRCLE
NAVARRE BEACH, FL 32566

New Principal Place of Business:

2204 COLT ROAD
INDIANAPOLIS, IN 46227

Current Mailing Address:

2549 CYPRESS POINT CIRCLE
NAVARRE BEACH, FL 32566

New Mailing Address:

2204 COLT ROAD
INDIANAPOLIS, IN 46227

FEI Number: 59-3596062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELMICH, KEVIN M ESQ.
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32540 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: D () Delete
Name: SHROUT, JOHN T
Address: 2549 CYPRESS POINT CIRCLE
City-St-Zip: GULF BREEZE, FL 32566

Title: D () Delete
Name: SHROUT, MARILYN E
Address: 2549 CYPRESS POINT CIRCLE
City-St-Zip: NAVARRE BEACH, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHROUT, JOHN T
Address: 2204 COLT ROAD
City-St-Zip: INDIANAPOLIS, IN 46227

Title: D (X) Change () Addition
Name: SHROUT, MARILYN E
Address: 2204 COLT ROAD
City-St-Zip: INDIANAPOLIS, IN 46227

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN T. SHROUT

D

07/21/2004

Electronic Signature of Signing Officer or Director

Date