

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001307

Entity Name: AIRSTREAM, INC.

FILED  
Feb 16, 2011  
Secretary of State

**Current Principal Place of Business:**

419 W. PIKE ST  
JACKSON CENTER, OH 45334

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 629  
JACKSON CENTER, OH 45334 US

**New Mailing Address:**

FEI Number: 93-0768561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WHEELER, BOB  
Address: 419 W PIKE ST  
City-St-Zip: JACKSON CENTER, OH 45334

Title: V  
Name: WAHL, MARK  
Address: 419 W PIKE ST  
City-St-Zip: JACKSON CENTER, OH 45334

Title: V  
Name: FROELICH, DANIEL R  
Address: 419 W PIKE ST  
City-St-Zip: JACKSON CENTER, OH 45334

Title: MGR  
Name: OAKLEY, STEPHANIE A  
Address: 419 W PIKE ST  
City-St-Zip: JACKSON CENTER, OH 45334 US

I hereby 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 all other like empowered.

SIGNATURE: DANIEL R. FROELICH

V

02/16/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date