

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007270

**Entity Name:** AIR STORMERS, INC.

**Current Principal Place of Business:**

1629 SE TRADITION TRACE  
STUART, FL 34997

**Current Mailing Address:**

1629 SE TRADITION TRACE  
STUART, FL 34997

**FEI Number: 59-3843053**

**Certificate of Status Desired: No**

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

BARDEAU, DAVE  
1629 SE TRADITION TRACE  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title V  
Name BECHTOLD, LEN  
Address 13637 185TH PLACE NORTH  
City-State-Zip: JUPITER FL 33478

Title T  
Name BARDEAU, DAVE  
Address 1629 SE TRADITION TRACE  
City-State-Zip: STUART FL 34997

Title D  
Name SMULLEN, JOHN  
Address 3355 SE FEDERAL HWY  
City-State-Zip: STUART FL 34997

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: DAVE BARDEAU**

**SECRETARY TREASURER 04/23/2014**

Electronic Signature of Signing Officer/Director Detail

Date