| 2018 FLORIDA PROFIT CORPO | ORATION ANNUAL REPORT |
|---------------------------|-----------------------|
|                           |                       |

DOCUMENT# P98000047171

Entity Name: AVAIRPROS PROJECTS, INC.

## Current Principal Place of Business:

5551 RIDGEWOOD DRIVE STE 300 NAPLES, FL 34108

## **Current Mailing Address:**

5551 RIDGEWOOD DRIVE STE 300 NAPLES, FL 34108 US

## FEI Number: 59-3514917

## Name and Address of Current Registered Agent:

DEMKOVICH, PAUL B 5551 RIDGEWOOD DRIVE STE 300 NAPLES, FL 34108 US Certificate of Status Desired: No

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  | E: PAUL B. DEMKOVICH  |   |   | 01/15/2018 |  |
|--|---|---|---|------------|--|
|  | Electronic Signature of Registered Agent  |   |   | Date       |  |
| Officer/Director Detail :                                      |   |   |   |            |  |
| Title  | DIRECTOR/CHAIRMAN OF THE<br>BOARD OF DIRECTORS  | Title                                       |   |            |  |
| Name   | STROHM, PHILLIP A   | Name DEMKOVICH, PAUL B                      |   |            |  |
| Address  | 5551 RIDGEWOOD DRIVE STE 300  | Address<br>City-State-Zip:                  | 5551 RIDGE DRIVE STE 300  |            |  |
| City-State-Zip:  | NAPLES FL 34108   |   | NAPLES FL 34108   |            |  |
| Title  | DIRECTOR/CEO  | Title<br>Name                               | DIRECTOR<br>ROSS, MATTHEW   |            |  |
| Name<br>Address  | CHIVINGTON, STEVEN P<br>5551 RIDGEWOOD DRIVE STE 300                                    | Address<br>City-State-Zip:                  | 5551 RIDGEWOOD DRIVE STE<br>NAPLES FL 34108                             | 300        |  |
| City-State-Zip:<br>Title<br>Name<br>Address<br>City-State-Zip: | NAPLES FL 34108<br>CS<br>MCCARTHY, KATE<br>5551 RIDGEWOOD DR.STE 300<br>NAPLES FL 34108 | Title<br>Name<br>Address<br>City-State-Zip: | PRESIDENT<br>CASTO, GREG<br>5551 RIDGEWOOD DRIVE STE<br>NAPLES FL 34108 | 300        |  |

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.

CORPORATE SECRETARY 01/15/2018

Date

Electronic Signature of Signing Officer/Director Detail