

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003874

FILED
Apr 28, 2008
Secretary of State

Entity Name: DALLAS AIRMOTIVE, INC.

Current Principal Place of Business:

900 NOLEN DRIVE
SUITE A
GRAPEVINE, TX 76051 US

New Principal Place of Business:

Current Mailing Address:

201 S. ORANGE AVE., SUITE 1100
ATTN: BBA TAX DEPT.
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 75-2530158 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: MCELROY, HUGH
Address: 201 S ORANGE AVE STE 1100
City-St-Zip: ORLANDO, FL 32801 US

Title: VPCE () Delete
Name: MERDAE, DOUGLAS
Address: 201 S ORANGE AVE STE 1100
City-St-Zip: ORLANDO, FL 32801 US

Title: S () Delete
Name: MURRER, GREGORY J
Address: 5 POWERHOUSE LN
City-St-Zip: BOXFORD, MA 01921 US

Title: D () Delete
Name: VAN ALLEN, BRUCE S
Address: 32245 EQUESTRIAN TRAIL
City-St-Zip: SORRENTO, FL 32776 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: MCELROY, HUGH
Address: 8200 FIRESTONE DRIVE
City-St-Zip: FLOWER MOUND, TX 75022 US

Title: VPCE (X) Change () Addition
Name: MEADOR, DOUGLAS
Address: 2801 WATERVIEW LANE
City-St-Zip: FLOWER MOUND, TX 75022 US

Title: VP (X) Change () Addition
Name: MADIEREDDI, NANDAKUMAR
Address: 1230 LAKEWAY DRIVE
City-St-Zip: SOUTHLAKE, TX 76092 US

Title: VP (X) Change () Addition
Name: HASTINGS, DORIS
Address: 6801 RAINTREE PLACE
City-St-Zip: FLOWER MOUND, TX 75022 US

Title: D () Change (X) Addition
Name: VAN ALLEN, BRUCE S
Address: 32245 EQUESTRIAN TRAIL
City-St-Zip: SORRENTO, FL 32776 US

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE S. VAN ALLEN

D

04/28/2008

Electronic Signature of Signing Officer or Director

_____ Date