

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000259

FILED  
Feb 07, 2011  
Secretary of State

Entity Name: CAE SIMUFLITE INC.

**Current Principal Place of Business:**

2929 WEST AIRFIELD DRIVE  
DALLAS/FT.WORTH AIRPORT, TX 75261

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 619119  
DFW AIRPORT, TX 75261

**New Mailing Address:**

FEI Number: 06-1462730

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: ROBERTS, JEFFREY  
Address: 2929 WEST AIRFIELD DRIVE  
City-St-Zip: DALLAS/FT.WORTH AIRPORT, TX 75260

Title: S  
Name: ALLMAND, DAVID  
Address: 4908 TAMPA WEST BOULEVARD  
City-St-Zip: TAMPA, FL 33634

Title: T  
Name: FREDERICK, GLENN  
Address: 4908 TAMPA WEST BOULEVARD  
City-St-Zip: TAMPA, FL 33634

Title: D  
Name: RAQUEPAS, ALAIN  
Address: 2929 WEST AIRFIELD DR  
City-St-Zip: DALLAS/FT WORTH AIRPORT, TX 75261

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: JEFF JENKINS

MR

02/07/2011

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

\_\_\_\_\_ Date