Paperwork Reduction Act Statement: The information collected on this form is necessary to obtain aircraft re-registration. We estimate that it will take approximately 30 minutes to complete the form. Please note that any agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. Form Approved, OMB No. 2120-0729

a valid OMB control number. Form Approved, OMB No. 2120-0729

"Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Avenue SW, Washington, DC 20591. ATTN: Information Collection Clearance Officer, AES-200"

DEPARTMENT OF TRANSPORTATION-FEDERAL AVIATION ADMINISTRATION AIRCRAFT RE-REGISTRATION APPLICATION

FAILURE TO RE-REGISTER WILL RESULT IN CANCELLATION OF REGISTRATION AND REGISTRATION NUMBER ASSIGNMENT (See 14 C.F.R. §§ 47.15(i), 47.40 and 47.41)

		SERIAL NUMBER				
N 101RP		E102G72				
MANUFACTURER GLASER-DIRKS FLUGZEUGBAU		MODEL DG-100G				
DATE OF ISSUANCE 10/09/2011	DATE OF EXPIRA 10/31/2014	DATE OF EXPIRATION		TYPE OF REGISTRATION INDIVIDUAL		
	IAILING ADDRESS OF REGISTERED OWNER		INFORMATION FOR COMPLETION			
(If individual, give last name, first name and middle initial) (Owner 1) DEROSA JOHN HOWARD			Additional information may be obtained at our web page http://registry.faa.gov/renewregistration or by phone at 866-762-9434.			
(Owner 2)			Aircraft Registration Information may be reviewed at :			
Note: Enter any additional owner names on page two of this document.			http://registry.faa.gov/aircraftinguiry			
(Address) 35W529 PARSONS RD			Please pay fees with a check or money order payable to the Federal Aviation Administration. Signature Requirements for Listed Registration Types:			
(Address)						
City WEST DUNDEE State IL Zip 60118-9281						
Country			 Individual owner must sign. Partnership a general partner must sign. Corporation a corporate officer or managing official must sign. Limited Liability Co. a member, manager, or officer who is authorized to manage the LLC must sign. Co-owner each co-owner must sign, continuing as necessary, 			
PHYSICAL ADDRESS (REQUIRED WHEN MAILING ADDRESS IS A P.O. BOX OR MAIL DROP)						
(Address) (Address)						
(Address) Sta			on page number two.			
Country			overnme All sigr	natures must be in ink.	on may sign.	
		_				
TO RE-REGISTER AIRCRAFT: REVIEW REGISTRATION INFORMATION, ENTER CORRECTIONS IN BLANKS PROVIDED, CHECK APPLICABLE BLOCK BELOW, SIGN, DATE, & MAIL WITH THE \$5 FEE, To: The FAA Aircraft Registration Branch, PO Box 25504, Oklahoma City, OK, 73125-0504. I (WE) CERTIFY THE: NAME(S) AND MAILING ADDRESS SHOWN ABOVE FOR THE OWNER(S) OF THIS AIRCRAFT ARE CORRECT, OWNERSHIP MEETS CITIZENSHIP REQUIREMENTS OF 14 CFR \$47.3, AIRCRAFT IS NOT REGISTERED UNDER THE LAWS OF ANY FOREIGN COUNTRY. UPDATE THE MAILING / PHYSICAL ADDRESS AS SHOWN BELOW. I (WE) CERTIFY THE: NAME(S) SHOWN ABOVE FOR THE OWNER(S) OF THIS AIRCRAFT IS CORRECT, OWNERSHIP MEETS THE CITIZENSHIP REQUIREMENTS OF 14 CFR \$47.3, AIRCRAFT IS NOT REGISTERED UNDER THE LAWS OF ANY FOREIGN COUNTRY. MAILING ADDRESS			TO CANCEL THE REGISTRATION FOR THIS AIRCRAFT: THE LAST REGISTERED OWNER MUST: MARK THE APPLICABLE BLOCK(S), COMPLETE, SIGN, DATE & Mail with any fees to: The FAA Aircraft Registration Branch, PO Box 25504, Oklahoma City, OK, 73125-0504. CANCELLATION OF REGISTRATION IS REQUESTED FOR THE REASON MARKED BELOW, 1. THE AIRCRAFT WAS SOLD TO: (Show purchaser's name and address)			
PHYSICAL ADDRESS: COMPLETE IF PHYSICAL ADDRESS HAS CHANGED, OR NEW MAILING ADDRESS IS A PO BOX OR MAIL DROP.			2. THE AIRCRAFT IS DESTROYED OR SCRAPPED. 3. THE AIRCRAFT WAS EXPORTED TO:			
			4. OTHER, Specify			
			IN OW	CANCELLATION, PLEASE R NERS' NAME. The \$10 check r reservation fee is enclosed.		
SIGNATURE OF OWNER 1	PRINTED NAME OF SIGN	ER	Т	TITLE	DATE	
Electronically Certified by Registered Owners				10/9/2011		
SIGNATURE OF OWNER 2	PRINTED NAME OF SIGN	IER	Т	TITLE	DATE	

Note: Twelve (12) owner names may be entered on this page. If you require more, enter the first 12 names and then print this page by pressing the 'Print Page 2' button below. Next click the 'Reset' button to clear the data fields (from page 2 only) to add more names. Repeat action as needed.

NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER	1	DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER	I	DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER		DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER	1	DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER	1	DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
NAME OF OWNER	1	DATE:
SIGNATURE	PRINTED NAME OF SIGNER	TITLE:
	1	1

AC Form 8050-1A (03/11) REF NNUM: 101RP