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Jan 28 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 193932 (1)

1. Corporation Name
FLEETWING CORPORATION



Principal Place of Business: 742 S COMBEE ROAD, PO BOX 22, LAKELAND FL 33802
Mailing Address: 742 S COMBEE ROAD, PO BOX 22, LAKELAND FL 33802-0022

3. Date Incorporated or Qualified: 06/18/1956
3a. Date of Last Report: 04/25/1996

2. Principal Place of Business (21-23) and Mailing Address (26-28) details including Suite, Apt. #, etc., City & State, Zip, and Country.
4. FEI Number: 59-0775191
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes (checked)

9. Name and Address of Current Registered Agent: SMITH, E. B., 742 SOUTH COMBEE RD., LAKELAND FL 33801
10. Name and Address of New Registered Agent (81-85) details including Name, Street Address, City, and Zip Code (FL).

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include names, titles, and addresses for David A. Ricketts, SMITH, E. B., W.R. Elsberry, SMITH, Natalie E., and SMITH, Walter Andrew.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental filing report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the person authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet, if an address.

SIGNATURE: [Signature] DATE: 1/20/97 DAYTIME PHONE #: 941-665-7557

CR2E034 (9/96)