FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/18/1956

4. FEI Number: 59-0775191 — Applied For / Not Applicable

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

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 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	RICKETTS, DAVID A.	
STREET ADDRESS	742 S COMBEE RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE	VD	☐ DELETE
NAME	SMITH,E B	
STREET ADDRESS	742 S COMBEE RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE	STD	☐ DELETE
NAME	ELSBERRY, W.R.	
STREET ADDRESS	742 S COMBEE RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE	ASTD	☐ DELETE
NAME	SMITH, NATALIE E.	
STREET ADDRESS	742 S COMBEE RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE	VD	☐ DELETE
NAME	SMITH, WALTER ANDREW	
STREET ADDRESS	742 S COMBEE RD	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	☐ DELETE
NAME	SMITH, C.P.	
STREET ADDRESS	742 S COMBEE RD	
CITY-ST-ZIP	LAKELAND FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Granger, Patsy	
1.3 STREET ADDRESS	17713 Hampshire Oak	
1.4 CITY-ST-ZIP	Tampa, FL 33647-2545	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	Curran, Natalie E.	
4.3 STREET ADDRESS	3811 Cardenal Ave	
4.4 CITY-ST-ZIP	Ruskin, FL 33573	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	☒ Change ☐ Addition
6.2 NAME	McGinnis Cecilia	
6.3 STREET ADDRESS	3625 Alcot Way	
6.4 CITY-ST-ZIP	Cummings, GA 30041	

14. I 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 annual 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 receiver or trustee empowered 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 attachment with an address.

SIGNATURE: David A. Ricketts — 4-21-98 — 941-665-7557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)