

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**F23 000006742**

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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : SWAINE, HARRIS & WOHL, P.A.  
 Account Number : I19980000021  
 Phone : (863)465-2811  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: service@heartlandlaw.com

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Great Commission Aviation, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Great Commission Aviation Inc  
Name of Corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Jason Wilkinson  
Name of Person

Great Commission Aviation, Inc.  
Firm/Company

6077 Stafford Oaks Dr  
Address

Sebring FL 33875  
City/State and Zip Code

greatcommissionaviation@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Wilkinson at ( 501 ) 707-8097  
Name of Person Area Code Daytime Telephone Number

Mailing Address:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Great Commission Aviation, Inc.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. North Carolina 3. 47-3727819  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/17/2015 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1301 & 617.1502, F.S., to determine penalty liability.)

7. 6077 Stafford Oaks Dr, Sebring, FL 33875  
(Principal office street address)

(Current mailing address, if different)

8. Aviation Education / Not For Profit  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jason Wilkinson  
Office Address: 6077 Stafford Oaks Dr  
Sebring, Florida 33875  
(City) (Zip Code)

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10. Registered agent's acceptance:  
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Jason Wilkinson

Vice Chairman Address: 6077 Stafford Oaks

Director Sebring FL 33875

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: Liam Wilkinson

Vice Chairman Address: 6077 Stafford Oaks

Director Sebring FL 33875

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: Justin Smith

Vice Chairman Address: 2859 Briarwood Lane

Director Sebring FL 33875

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jason Wilkinson, Executive Director  
(Typed or printed name and capacity of person signing application)

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# NORTH CAROLINA

## Department of the Secretary of State

### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### **GREAT COMMISSION AVIATION, INC.**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 7th day of April, 2015, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of November, 2023.



Scan to verify online.

*Elaine F. Marshall*

Secretary of State