


**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

1-2

PROFIT CORPORATION ANNUAL REPORT <b>1996</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F27168**  
 1. Corporation Name  
**FLOTRIN AIR, INC.**

Principal Place of Business <b>821 AVENUE "E"                  RIVIERA BEACH, FL                  33404</b>	Mailing Address <b>821 AVENUE "E"                  RIVIERA BEACH, FL                  33404</b>
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified <b>03/25/1981</b>	3a. Date of Last Report <b>06/07/1995</b>
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number <b>59-2087235</b>	Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>Filed w/ parent Co. Birdsell, Inc.</i>

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and the corporation (if the registered agent's signature is required when not using a notary)

12. OFFICERS AND DIRECTORS

TITLE CD	NAME CLINE, RICHARD G.	STREET ADDRESS 1844 FERRY ROAD	CITY-ST-ZIP NAPERVILLE, IL 60563	<input checked="" type="checkbox"/> DELETE
TITLE D	NAME FISHER, THOMAS L.	STREET ADDRESS 1844 FERRY ROAD	CITY-ST-ZIP NAPERVILLE, IL 60563	<input type="checkbox"/> DELETE
TITLE SD	NAME CYRANOSKI, DAVID L.	STREET ADDRESS 1844 FERRY ROAD	CITY-ST-ZIP NAPERVILLE, IL 60563	<input type="checkbox"/> DELETE
TITLE Y	NAME LAPLACE, PHILBERT L.	STREET ADDRESS 821 AVENUE "E"	CITY-ST-ZIP RIVIERA BEACH, FL 33404	<input type="checkbox"/> DELETE
TITLE PD	NAME MURRELL, RICHARD	STREET ADDRESS 821 AVENUE "E"	CITY-ST-ZIP RIVIERA BEACH, FL 33404	<input type="checkbox"/> DELETE
TITLE VT	NAME BEHRENS, GEORGE M.	STREET ADDRESS 821 AVENUE "E"	CITY-ST-ZIP RIVIERA BEACH, FL 33404	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D	NAME NARDI, THOMAS A.	STREET ADDRESS 1844 FERRY ROAD	CITY-ST-ZIP NAPERVILLE, IL 60563	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
21 TITLE DC	NAME LAPLACE, L. PHILIBERT	STREET ADDRESS 400001799514	CITY-ST-ZIP -04/29/96--01089--026 ***208.75	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Francisco J. Garcia* DATE: **4/24/96**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **FRANCISCO J. GARCIA, ASSISTANT SECRETARY**  
 DATE: **407 840 2825**  
 DISPATCH PREFIX: **SG-4-29-96**

CR2E034 (12/95)

**FLOTRIN AIR, INC.**  
**(DOCUMENT #F27168)**  
**1996 CORPORATION ANNUAL REPORT**

**OFFICERS AND DIRECTORS - continued**

*Vice President*  
John Cornish  
821 Avenue "E"  
Riviera Beach, FL 33404

*Assistant Controller*  
John E. Warman  
1844 Ferry Road  
Naperville, IL 60563

*Vice President*  
Robert Mark Chapman  
821 Avenue "E"  
Riviera Beach, FL 33404

*Assistant Secretary*  
Fay L. Butler  
821 Avenue "E"  
Riviera Beach, FL 33404

*Vice President*  
Glen H. Fornell  
821 Avenue "E"  
Riviera Beach, FL 33404

*Assistant Secretary*  
Francisco J. Garcia  
821 Avenue "E"  
Riviera Beach, FL 33404

**DELETE:**

*Controller & Assistant Secretary*  
Roberto A. Bello  
821 Avenue "E"  
Riviera Beach, FL 33404

**ADD:**

*Controller & Assistant Secretary*  
Dan D. Croft  
821 Avenue "E"  
Riviera Beach, FL 33404