2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K81001

Title:

Title:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

FILED Feb 22, 2005 Secretary of State

Entity Name: BAY AIRCRAFT OWNERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 218 WOODLAWN DRIVE PANAMA CITY BEACH, FL 32407 US **Current Mailing Address: New Mailing Address:** 218 WOODLAND DRIVE PANAMA CITY BEACH, FL 32407 US FEI Number: 59-2995773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, JOSEPH M. 218 WOÓDLAWN DRIVE PANAMA CITY BEACH, FL 32407 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: NEAL, J.W. Name: NEAL, J.W. 4122 MARLIN STREET 4122 MARLIN STREET Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: PANAMA CITY BEACH, FL 32408 US Title: SD Title: SD () Delete (X) Change () Addition BROWN, JOSEPH M., Name: Name: BROWN, JOSEPH M., 218 WOODLAWN DR. 218 WOODLAWN DR. Address: Address: PANAMA CITY BEACH, FL 32407 PANAMA CITY BEACH, FL 32407 US City-St-Zip: City-St-Zip: (X) Change () Addition Title: PD () Delete Title: PD BRUCE, WILLIAM G BRUCE, WILLIAM G Name: Name: 520 N. MACARTHUR AVE. 520 N MACARTHUR AVE Address: Address: City-St-Zip: PANAMA CITY, FL City-St-Zip: PANAMA CITY, FL 32401 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH M. BROWN SD 02/22/2005

() Delete

() Delete

801 EAST 6TH STREET 309

PANAMA CITY, FL 32401

ROBERT, DONALD W

CALLAWAY, FL

7337 RODBROS DRIVE

KESSINGER, JOHN

(X) Change () Addition

(X) Change () Addition

KESSINGER, JOHN

ROBERT, DONALD W

7337 RODGERS DRIVE

CALLAWAY, FL 32404 US

801 EAST 6TH STREET 309

PANAMA CITY, FL 32401 US