

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K81001

FILED
Jan 13, 2009
Secretary of State

Entity Name: BAY AIRCRAFT OWNERS, INC.

Current Principal Place of Business:

218 WOODLAWN DRIVE
PANAMA CITY BEACH, FL 32407 US

New Principal Place of Business:

Current Mailing Address:

218 WOODLAND DRIVE
PANAMA CITY BEACH, FL 32407 US

New Mailing Address:

FEI Number: 59-2995773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JOSEPH M.
218 WOODLAWN DRIVE
PANAMA CITY BEACH, FL 32407 US

Name and Address of New Registered Agent:

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:

Title: TD () Delete
Name: NEAL, J.W.
Address: 4122 MARLIN STREET
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: SD () Delete
Name: BROWN, JOSEPH M.,
Address: 218 WOODLAWN DR.
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

Title: PD () Delete
Name: TRANTHAM, JOEY L
Address: 708 BUNKERS COVE ROAD
City-St-Zip: PANAMA CITY, FL 32401 US

Title: VPD () Delete
Name: KESSINGER, JOHN
Address: 801 EAST 6TH STREET 309
City-St-Zip: PANAMA CITY, FL 32401 US

Title: D () Delete
Name: ROBERT, DONALD W
Address: 7337 RODGERS DRIVE
City-St-Zip: CALLAWAY, FL 32404 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: JOSEPH M. BROWN

SD

01/13/2009

Electronic Signature of Signing Officer or Director

_____ Date