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May 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26412 (9)

1. Corporation Name
108 HANGAR MATES INC.



Principal Place of Business: 121 WYNNEHAVEN ROAD C/O JOHN HICKS MARY ESTHER FL 32569
Mailing Address: 121 WYNNEHAVEN ROAD C/O JOHN HICKS MARY ESTHER FL 32569-2718

3. Date Incorporated or Qualified: 05/12/1988
3a. Date of Last Report: 04/24/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 2 Rue de le Roi	26 2 Rue de le Roi	59-2900288	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 C/O JAMES F. JANSA	27 C/O JAMES F. JANSA	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 FT. WALTON BEACH, FL	28 FT. WALTON BEACH, FL	<input type="checkbox"/>	
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24 32547	29 32547-1719		
Country	Country		
25 USA	30 USA		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HICKS, JOHN 121 WYNNEHAVEN ROAD MARY ESTHER FL 32569	81 Name: JAMES F. JANSA 82 Street Address (P.O. Box Number is Not Acceptable): 2 RUE de le ROI 83 84 City: FT. WALTON BEACH FL 85 Zip Code: 32547

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: James F. Jansa, JAMES F. JANSA President, Director APR 16, 1997
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD HICKS, JOHN 121 WYNNEHAVEN RD. MARY ESTHER FL	1.1 TITLE	President Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	JAMES F. JANSA
STREET ADDRESS		1.3 STREET ADDRESS	2 RUE de le ROI
CITY-ST-ZIP		1.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547-1719
TITLE	VD WALKER, JACK 24 POPLAR AVE SHALIMAR FL	2.1 TITLE	Vice President Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	A.C. BRANDON, JR.
STREET ADDRESS		2.3 STREET ADDRESS	175 MONAHAN DR., NE.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547
TITLE	STD JANSA, JAMES F 2 RUE DE LE ROI FT WALTON BCH FL	3.1 TITLE	Secretary Treasurer Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	JACK WALKER
STREET ADDRESS		3.3 STREET ADDRESS	24 POPLAR AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	SHALIMAR, FL
TITLE	D MCLEAN, MONTE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James F. Jansa, JAMES F. JANSA APR 16, 1997

CR2E037 (9/96)