
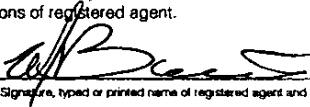
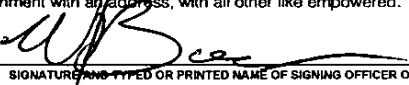


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 14, 2006 8:00 am
Secretary of State

08-14-2006 90036 005 ****61.25

DOCUMENT # N99000000967					
1. Entity Name THE CHEROKEE FLYERS, INC.					
Principal Place of Business 2922 PIPER DRIVE VERO BEACH, FL 32960			Mailing Address 2922 PIPER DRIVE VERO BEACH, FL 32960		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3557096	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CALDWELL, WILLIAM W 756 BEACHLAND BLVD VERO BEACH, FL 32963			7. Name and Address of New Registered Agent		
			Name Matthew Bourvic		
			Street Address (P.O. Box Number is Not Acceptable) 479 12th Place, SE		
			City Vero Beach		Zip Code 32962
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		DATE 10 August 6			
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GREEN, RICHARD M 2140 DUNMORE LANE VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Michael Giessert 2450 53rd Avenue Vero Beach, Florida 32966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEEN, JOEL M 1116 32ND AVE. SW VERO BEACH, FL 32962	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Matt Bourvic 1224 Palm Place Drive NE Palm Bay, Florida 32905	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MILES, CAROL A 6905 CITRUS PK BLVD FORT PIERCE, FL 34951	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Terri L. Mills 4435 6th Place SW Vero Beach, Florida 32968	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MILLS, TERRI L 4435 6TH PLACE SW VERO BEACH, FL 32968	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Jeff Gamon 1587 39th Avenue Vero Beach, Florida 32960	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GALLO, JOHN 660 45TH COURT SW VERO BEACH, FL 32968	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Michael Giessert 2450 53rd Avenue Vero Beach, Florida 32966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T O'MALLEY, R P 1120 31ST AVE VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Darla Stewart 1860 Waterford Drive #4 Vero Beach, Florida 32966	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		DATE: 10 August 6		DAYTIME PHONE: 772 299 2342	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					