

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90187 032 ***150.00

DOCUMENT # P93000071599

1. Entity Name

COMMERCIAL AIR MANAGEMENT, INC.



Principal Place of Business

**11000 METRO PKWY.
STE 30
FT MYERS FL 33912
US**

Mailing Address

**11000-28 METRO PKWY.
FT MYERS FL 33912
US**

2. Principal Place of Business

3. Mailing Address **11000-30 METRO PKWY**

5893 ELIZABETH ANN WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State **FORT MYERS, FL**
FORT MYERS, FL

Zip

Country

Zip **33912**
33912

Country

4. FEI Number

65-0443866

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

ELLIS, JON R

**7210 FALCON CREST CT 5893 ELIZABETH ANN WAY
FORT MYERS FL 33908 FORT MYERS, FL 33912**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 **M. Susan Ellis, Corporate Secretary**

(NOTE: Registered Agent signature required when reinstating)

2/18/03
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **ELLIS, JON R**
STREET ADDRESS **7210 FALCON CREST CT**
CITY-ST-ZIP **FORT MYERS FL 33908**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ELLIS, M S**
STREET ADDRESS **7210 FALCON CREST COURT**
CITY-ST-ZIP **FORT MYERS FL 33908**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **BOUDREAU, PAUL**
STREET ADDRESS **1301 LAFAYETTE WAY**
CITY-ST-ZIP **FORT MYERS FL 33919**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I 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 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 607, 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: **M. Susan Ellis, Corporate Secretary** **2/18/03 (339) 277-0029**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)