

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S22444 (1)**

1. Corporation Name

GAUDETS ULTRA AIR INC.



Principal Place of Business

Mailing Address

2284 TAMU-SOLA ST.
SARASOTA FL 34237

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SARASOTA FL 34237

3. Date Incorporated or Qualified 12/18/1990	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0229999	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 **8466 N Lockwood Ridge Rd**

26 **8466 N. Lockwood Ridge Rd**

22 Suite/Apt. #, etc.
246

27 Suite/Apt. #, etc.
246

23 City & State
SARASOTA FL

28 City & State
SARASOTA FL

24 Zip
34243

Country

29 Zip
34243

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GAUDET, ARTHUR R., SR.
804 68TH AVE. WEST
BRADENTON FL 34207**

81 Name Robert A. Watts
82 Street Address (P.O. Box Number is Not Acceptable) 7019, 12th St Ct E
83
84 City SARASOTA
85 State FL
86 Zip Code 34243

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *Arthur R. Gaudet* **Robert A. Watts** **5-18-96**
Signature (Typed or Printed Name of Registered Agent) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DP SECRETARY	NAME RIZI, ROGER	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 2284 TAMU-SOLA ST.	CITY-STATE-ZIP SARASOTA FL	1.2 NAME
TITLE DP V. CA PRES	NAME GAUDET, ARTHUR R., SR.	1.3 STREET ADDRESS
STREET ADDRESS 804 68TH AVE. WEST	CITY-STATE-ZIP BRADENTON FL	1.4 CITY-STATE-ZIP
TITLE PRES	NAME Robert A. Watts	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 7019 12th St Ct E	CITY-STATE-ZIP SARASOTA FL 34243	2.2 NAME
TITLE	NAME	2.3 STREET ADDRESS
STREET ADDRESS	CITY-STATE-ZIP	2.4 CITY-STATE-ZIP
TITLE	NAME	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	3.2 NAME
TITLE	NAME	3.3 STREET ADDRESS
STREET ADDRESS	CITY-STATE-ZIP	3.4 CITY-STATE-ZIP
TITLE	NAME	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	4.2 NAME
TITLE	NAME	4.3 STREET ADDRESS
STREET ADDRESS	CITY-STATE-ZIP	4.4 CITY-STATE-ZIP
TITLE	NAME	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	5.2 NAME
TITLE	NAME	5.3 STREET ADDRESS
STREET ADDRESS	CITY-STATE-ZIP	5.4 CITY-STATE-ZIP
TITLE	NAME	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-STATE-ZIP	6.2 NAME
TITLE	NAME	6.3 STREET ADDRESS
STREET ADDRESS	CITY-STATE-ZIP	6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Arthur R. Gaudet* **Robert A. Watts** **5-18-96** **941-755-3176**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Phone #

CR2E034 (12/95)