

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S37683 (7)					
1. Corporation Name AMBIENT AIR SERVICES, INC.					
Principal Place of Business 106 AMBIENT AIR WAY STARKE FL 32091 US			Mailing Address 106 AMBIENT AIR WAY STARKE FL 32091 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/08/1991	
21		26		4. FEI Number 59-3055513	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
23		28			
Zip	Country	Zip	Country		
24		25			
9. Name and Address of Current Registered Agent JOSEPH L. COOKSEY JR 2356 CASEY LANE GREEN COVE SPRINGS FL 32043				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code
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					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE					
12. OFFICERS AND DIRECTORS					
TITLE	P	☐ DELETE			
NAME	COOKSEY, JOSEPH L, JR.				
STREET ADDRESS	2356 CASEY LANE				
CITY - ST - ZIP	GREEN COVE SPRINGS FL				
TITLE	ST	☐ DELETE			
NAME	SHOLTES, DAVID C				
STREET ADDRESS	9113 NW 176TH TERRACE				
CITY - ST - ZIP	ALACHUA FL				
TITLE	VP	☐ DELETE			
NAME	SHOLTES, ROBERT S.				
STREET ADDRESS	2072 NW 14TH AVENUE				
CITY - ST - ZIP	GAINESVILLE FL				
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE ☐ Change ☐ Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY - ST - ZIP					
2.1 TITLE ☐ Change ☐ Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE ☐ Change ☐ Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY - ST - ZIP					
4.1 TITLE ☐ Change ☐ Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY - ST - ZIP					
5.1 TITLE ☐ Change ☐ Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE ☐ Change ☐ Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY - ST - ZIP					

14. 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 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: Joseph L. Cooksey Jr 1/16/98 904-964-8440

CR2E034 (10/97)