

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S61704

FILED  
Jan 16, 2005  
Secretary of State

Entity Name: GULFSTREAM AIRWAYS, INC.

**Current Principal Place of Business:**

526 ANGELA ST  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

2959 TIBURON BLVD EAST  
NAPLES, FL 34109 US

**Current Mailing Address:**

526 ANGELA ST  
KEY WEST, FL 330406849 US

**New Mailing Address:**

2959 TIBURON BLVD EAST  
NAPLES, FL 34109 US

FEI Number: 14-1737261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: HETTINGER, WILLIAM,  
Address: 3528 SUNRISE DR  
City-St-Zip: KEY WEST, FL 33040

Title: VP ( ) Delete  
Name: HETTINGER, CORINNA,  
Address: 3528 SUNRISE DR  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: HETTINGER, WILLIAM,  
Address: 2959 TIBURON BLVD EAST  
City-St-Zip: NAPLES, FL 34109

Title: VP (X) Change ( ) Addition  
Name: HETTINGER, CORINNA,  
Address: 2959 TIBURON BLVD EAST  
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM HETTINGER

PRES

01/16/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date