

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

APPROVED
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MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S01522** (9)
1. Corporation Name
74 AERO CLUB, INC.

Principal Place of Business: **349 ALPINE ST
ALTAMONTE SPRINGS FL 32701
5363 DESMOND LANE
ORLANDO, FL 32821**
Mailing Address: **349 ALPINE ST
ALTAMONTE SPRINGS FL 32701
5363 DESMOND LANE
ORLANDO, FL 32821**

Printed Name in This Space

2. Principal Place of Business: **5363 DESMOND LANE**
21. **5363 DESMOND LANE**
22. Suite Apt # etc.
23. City & State: **ORLANDO FLORIDA**
24. **32821** 25. **USA**
26. Mailing Address: **5363 DESMOND LANE**
27. Suite Apt # etc.
28. City & State: **ORLANDO, FLORIDA**
29. **32821** 30. **USA**

3. Date incorporated or qualified: **07/23/1990**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-3030915** OK
5. Certificate of Status (Required) ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. The corporation has adopted the International Business Code (IBC) Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
**DAVIS, AILEEN S.
349 ALPINE ST
ALTAMONTE SPRINGS FL 32701**

10. Name and Address of New Registered Agent
81. Name: **JAY R. KENNEDY**
82. Street Address (P.O. Box Number is not acceptable): **5363 DESMOND LANE**
83.
84. City: **ORLANDO** FL 85. Zip Code: **32821**

11. I, the undersigned, certify that the foregoing is a true and correct copy of the information required by the Florida Statutes, and that the same has been filed with the Secretary of State. I hereby accept the responsibility as registered agent. Date: **4/4/95**

SIGNATURE: *Jay R. Kennedy*

12. OFFICERS AND DIRECTORS
TITLE: **DIRECTOR MAINTENANCE**
NAME: **ROCKWELL, EDWARD M.**
ADDRESS: **3320 S.M.U. COURT
ORLANDO FL**
NAME: **DAVIS, ALAN W.**
ADDRESS: **349 ALPINE ST
ALTAMONTE SPRINGS FL** *Delete*
NAME: **KEED, JOHN E.**
ADDRESS: **1201 CORNERSTONE CT
ORLANDO FL** *Delete*
NAME: **DAVIS, AILEEN S.**
ADDRESS: **349 ALPINE ST
ALTAMONTE SPRINGS FL** *Delete*

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
NAME: **PRESIDENT/TREASURER** ☒ Change ☐ Addition
NAME: **JAY R. KENNEDY**
ADDRESS: **5363 DESMOND LANE
ORLANDO, FL 32821**
NAME: **SECRETARY** ☒ Change ☐ Addition
NAME: **EDWARD RAMIREZ-BONILLA**
ADDRESS: **9315 SPRINGVALE DR.
ORLANDO, FL 32825**

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for this corporation stated in Florida Statutes. I further certify that the information is true and correct and that my signature shall have the same legal effect as if made under oath. I understand that the corporation is required to file this report as required by the Florida Statutes, and that my signature is required to be filed with the report.

SIGNATURE: *Jay R. Kennedy (Pres.)*
PRINTED NAME OF FORMING OFFICER OR DIRECTOR

4/4/95 4072397778