


FILE NOW: FILING FEE IS \$61.25

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Jan 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 735885 (6) 1. Corporation Name BRANDON MODEL FLYERS, INCORPORATED					
Principal Place of Business 411 TOMAHAWK TRL. BRANDON FL 33511 US			Mailing Address 11500 SUMMIT W. BLVD. APT. 19 E TAMPA FL 33617		
2. Principal Place of Business 21 11500 Summit W, Blvd, Suite, Apt. #, etc. 22 Apt, 19 E City & State 23 Tampa FL Zip 24 33617		2a. Mailing Address 26 12106 Fruitwood Dr. Suite, Apt. #, etc. 27 City & State 28 Riverview FL Zip 29 33569 Country 30 USA		3. Date Incorporated or Qualified 05/21/1976 4. FEI Number 59-1789103 Applied For 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		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		9. Name and Address of Current Registered Agent HALL, KEITH 11500 SUMMIT WEST BLVD.E APT 19E TAMPA FL 33617			
10. Name and Address of New Registered Agent 81 Name David Brunner 82 Street Address (P.O. Box Number is Not Acceptable) 12106 Fruitwood Dr. 83 84 City Riverview FL 85 Zip Code 33569		11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE David Brunner - Treasurer 1-4-98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	POD	1.1 TITLE		Treasurer - T	
NAME	ZIEGLER, DAVID M.	1.2 NAME		David Brunner	
STREET ADDRESS	1310 RUSTLING OAKS DR.	1.3 STREET ADDRESS		12106 Fruitwood Dr.	
CITY-ST-ZIP	BRANDON FL	1.4 CITY-ST-ZIP		Riverview, FL 33569	
TITLE	TD	2.1 TITLE		D - Director	
NAME	JOHN SMIK	2.2 NAME		Doug Blair	
STREET ADDRESS	1903 N. TEAKWOOD DR. E.	2.3 STREET ADDRESS		226 Faithway Dr.	
CITY-ST-ZIP	PLANT CITY FL	2.4 CITY-ST-ZIP		Seffner, FL 33584	
TITLE	S	3.1 TITLE		P - President	
NAME	SAIFF, JIM	3.2 NAME		Keith Hall	
STREET ADDRESS	2727 W. FLETCHER AVE., APT. 25-C	3.3 STREET ADDRESS		11500 Summit W. Blvd #19E	
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP		Tampa, FL 33617	
TITLE	D	4.1 TITLE			
NAME	LITTLE, BOB	4.2 NAME			
STREET ADDRESS	205 REMBRANDT DRIVE	4.3 STREET ADDRESS			
CITY-ST-ZIP	BRANDON FL	4.4 CITY-ST-ZIP			
TITLE	VP	5.1 TITLE			
NAME	WALDON, BOB	5.2 NAME			
STREET ADDRESS	13316 RAULERSON ROAD	5.3 STREET ADDRESS			
CITY-ST-ZIP	DOVER FL	5.4 CITY-ST-ZIP			
TITLE		6.1 TITLE			
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY-ST-ZIP			



CR2E037 (10/97)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

1-4-98 813-671-8640