

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000005186

FILED  
Feb 26, 2007  
Secretary of State

Entity Name: ECOLOGICAL FLIGHT SERVICES, INC.

**Current Principal Place of Business:**

6444 SW GAINES AVE.  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

6444 SW GAINES AVE.  
STUART, FL 34997

**New Mailing Address:**

FEI Number: 65-0811364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCOTT, DONALD  
6444 SW GAINES AVE.  
STUART, FL 34997 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: VP ( ) Delete  
Name: SCOTT, DONALD  
Address: 6444 SW GAINES AVE  
City-St-Zip: STUART, FL 34997

Title: T ( ) Delete  
Name: SCOTT, DONALD  
Address: 6444 SW GAINES AVE  
City-St-Zip: STUART, FL 34997

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PRES (X) Change ( ) Addition  
Name: SCOTT, DONALD  
Address: 6444 SW GAINES AVE  
City-St-Zip: STUART, FL 34997

Title: TREA (X) Change ( ) Addition  
Name: SCOTT, DONALD  
Address: 6444 SW GAINES AVE  
City-St-Zip: STUART, FL 34997

Title: SEC ( ) Change (X) Addition  
Name: SCOTT, DONALD  
Address: 6444 SW GAINES AVE.  
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DONALD SCOTT

PRES

02/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date