## 2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 321854** 

**Entity Name: ANTIQUERS AERODROME INC** 

**Current Principal Place of Business:** 

6530 SKYLINE DR

DELRAY BEACH, FL 33446

**Current Mailing Address:** 

6530 SKYLINE DR

DELRAY BEACH, FL 33446 US

FEI Number: 59-2478945 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATED CORPORSTE SERVICES, LLC 6111 BROKEN SOUND PARKWAY NW SUITE 200 BOCA RATON, FL 33487 US

BOOK NATON, 1 E 35407 00

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

FILED Sep 02, 2015

**Secretary of State** 

CC2043646761

Officer/Director Detail:

Title D Title TD

Name LUMLEY, JOHN Name THOMAS, MARGARET S

Address 6778 SKYLINE DR Address 6703 SKYLINE DR

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

Title PRESIDENT Title SD

NameLARSON, ERICNamePREISER, PEGGY SAddress6633 SKYLINE DRAddress7282 SKYLINE DR

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

Title DIRECTOR Title VF

Name ARONOWITZ, JACK Name LIGNELLI, ELIANE Address 6591 SKYLINE DR Address 7432 SKYLINE DR

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

I hereby 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 all other like empowered.

SIGNATURE: MARGARET THOMAS

**TREASURER** 

09/02/2015