

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 175021

FILED
Jan 12, 2006
Secretary of State

Entity Name: SHOWALTER FLYING SERVICE, INC.

Current Principal Place of Business:

400 HERNDON AVE #111
ORLANDO, FL 328035134

New Principal Place of Business:

Current Mailing Address:

400 HERNDON AVE #111
ORLANDO, FL 328035134

New Mailing Address:

FEI Number: 59-0700191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, ROBERT B.
225 E ROBINSON #620
ORLANDO, FL 32801 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: CD () Delete
Name: SHOWALTER, ROBERT H.,
Address: 4511 N. LANDMARK DR
City-St-Zip: ORLANDO, FL

Title: ST () Delete
Name: KIMBALL, JANE S
Address: 5354 CEMETARY ROAD
City-St-Zip: ZELLWOOD, FL

Title: PD () Delete
Name: SHOWALTER, KIM S.,
Address: 4511 N. LANDMARK DR.
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: WHITE, ROBERT B.,
Address: 225 E ROBINSON #620
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JANE S. KIMBALL

CSEC

01/12/2006

Electronic Signature of Signing Officer or Director

Date