2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 340137 1. Entity Name FROMHAGEN AVIATION INC								SECRETARY OF STATE DIVISION OF CORPORATIONS 06 DEC 14 AM 11: 13				
Principal Place 1838 SOUTH CLEARWATI	WOOD LA	NE	1838 S	Mailing Address 1838 SOUTHWOOD LANE CLEARWATER FL 33764							PPD44 B45[4 5]51	
2. Principal P	ace of Busin	ness	3. Mailir	3. Mailing Address					INN ITIIL RISTI NAINE TIRS	O IRIN (ABI SIBU DIDI) 1] # #L!###
Suite, Apt.	#, etc.		Suite,	Suite, Apt. #, etc				1s	t MOORE	CR2E034	(10/05)	
City & State	2	****	City 8	City & State				4. FEI Numb	. FEI Number			
Zip Country			Zip	Zip Count				5. Certificate	of Status Desire	\$9.75 Additional		
	6. Name	and Address of Curre	nt Registered	legistered Agent			7. Name and Address of New Registered Agent					
STERRETT, CAROL F 1838 SOUTHWOOD LANE CLEARWATER FL 33764						Street Ac	idress (f	P.O Box Numb	er is Not Accept	able)		
						City				FL	Zip C	
signature .	Signature, typed LE NOW! May 1, 200	or portiod name of registered age 1! FEE IS \$150.00- 06 Fee Will, Be \$550.0	tuvt ent and little it applie	t		Car	RQL		9. Election Ca	DATE mpaign Financ Contribution.	ing \$	ith, and accept 55.00 May Be dded to Fees
Make Check	(Payable t	o Florida Department OFFICERS AN		ıs	11.			ADDITIONS	/CHANGES TO	OFFICERS AND	DIRECT	ORS IN 11
TITLE NAME STREET ADDRESS CITY-SI-ZEP	1838 SOU	, CAROL F THWOOD LANE TER FL 33764		☐ Delete				70	00081: /060103	0295	☐ Chan	ge 🔲 Addition
	1666 ROB	GEN, CARL JR. INHOOD LANE ITER FL 33764		Delete TITL NAM STRI CITY								ge 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Defeto	1						Chan	ye Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete				T. BI	ATEM	ent_	2 W	ge \ \ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Defete	1						☐ Chan	ge 🗌 Addition
THILE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	B						☐ Chan	ge 🗋 Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNATURE: CEO 15 of 6 CARL FROMHAGEN CEO 10-15-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: Dayloric Phone F												