

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2007 SEP -5 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08022007 Chg-P CR2E034 (12/06)

4. FEI Number
59-1229417

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

DOCUMENT # 340137

1. Entity Name
FROMHAGEN AVIATION INC



Principal Place of Business
1838 SOUTHWOOD LANE
CLEARWATER, FL 33764

Mailing Address
1838 SOUTHWOOD LANE
CLEARWATER, FL 33764

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

STERRETT, CAROL F
1838 SOUTHWOOD LANE
CLEARWATER, FL 33764

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	O	<input type="checkbox"/> Delete
NAME	STERRETT, CAROL F	
STREET ADDRESS	1838 SOUTHWOOD LANE	
CITY-ST-ZIP	CLEARWATER, FL 33764	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	FROMHAGEN, CARL JR.	
STREET ADDRESS	1666 ROBINHOOD LANE	
CITY-ST-ZIP	CLEARWATER, FL 33764	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

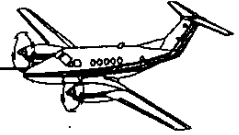
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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: CARL FROMHAGEN Carl Fromhagen 28 Aug 07 7225316970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Filing Fee #

Fromhagen Aviation, Inc.

1838 SOUTHWOOD LANE
CLEARWATER, FLORIDA 33764
PHONE: (727) 531-6970
FAX: (727) 531-6791
CELL: (727) 460-2993

"A Name in Aviation Since 1916"



July 14, 2007

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Attn: Jeraline Saulberry, Document Specialist

I received a postcard relative to my not having filed a statement for 2007 at the beginning of the year. However, I never received the corporate form which was required and did not realize the time had passed. I am requesting your assistance in sending me this so I can complete it and return it. Of course, I will pay the required fee. Thanks for your attention to my dilemma.

Carl Fromhagen
Carl Fromhagen