

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2007 SEP -5 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08022007 Chg-P CR2E034 (12/06)

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 #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip Country
 Zip Country

4. FEI Number
59-1229417
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
STERRETT, CAROL F
1838 SOUTHWOOD LANE
CLEARWATER, FL 33764

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

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 _____
(Signature of Registered Agent or authorized representative) (Registered Agent's print name and address) 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 NAME STREET ADDRESS CITY-ST-ZIP	O STERRETT, CAROL F 1838 SOUTHWOOD LANE CLEARWATER, FL 33764 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO FROMHAGEN, CARL JR. 1666 ROBINHOOD LANE CLEARWATER, FL 33764 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600109213066 09/07/07--01035--016 **236.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 7275316970**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Filing Phone #

Fromhagen Aviation, Inc.



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

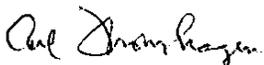
"A Name in Aviation Since 1916"

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