

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mednar,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 367095

(7)

1. Corporation Name

A1A AERIAL SERVICES, INC.

Principal Place of Business

230 SHELL HARBOR RD
WELAKA FL 32193
US

Mailing Address

PO BOX 1109
WELAKA FL 32193
US



2. Principal Place of Business

21

State Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

State Apt. #, etc.

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City & State

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Zip

Country

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30

9. Name and Address of Current Registered Agent

KOHUTH, R.T.
SHELL HARBOR RD AT RIVER
PO BOX 1109
WELAKA FL 32193

3. Date Incorporated or Qualified

07/16/1970

3a. Date of Last Report

03/21/1995

4. FEI Number

59-1087025

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of the person filing this report, or the person authorized to file on behalf of the corporation)

(Signature of the Registered Agent, or the person authorized to file on behalf of the Registered Agent)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

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1.1 TITLE

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☐ Addition

2. NAME

KOHUTH, R.T.

3. STREET ADDRESS

SHELL HARBOR RD AT RIVER

4. CITY-STATE-ZIP

WELAKA FL

12 NAME

13 STREET ADDRESS

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