PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 397123

1. Corporation Name

PENSACOLA AEROMOTIVE CORP.

						L SULLAN HALL TOUR HOLES HALL CHEER HALL COL	i en	a (i) ala ii) ala i(38 1)	
Principal P	lace of Business	Mailing Address							
1018 UNDER PENSACOLA						DO NOT WRITE IN TH	IS SPACE		
,						3. Date Incorporated or Qualifed			
						03/09/1972			
2. Principa	Place of Business 2a. Mailing Address					4. FEI Number App		Applied For	
21						59-1386791		Not Applicable	
Suite, A	pt. #, etc.	Suite, Apt. #, etc.	#, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City &	State	City & State			>	6Election Campaign Financing		00 мау Ве	
23		28				Trust Fund Contribution		ed to Fees	
Zip '	Country			ntry		8. This corporation owes the current year Intangible Personal Property Tax Yes No			
24	25		30			Personal Property Tax. 10. Name and Address of New Registered	Yes Agent		
* 1	9. Name and Address of Current	Registered Agent		81	Name	IV. Name and Address of New Register	d Agent_		
M	AYO, DIANA, D		L						
5555 PEACHTREE COURT				82 Street Address (P.O. Box Number is Not Acceptable)			ļ		
	ENSACOLA FL 32504	•		83		71.40			
			ŀ	84	City		85	Zip Code	
,					nomed come	-	- I	its registered	
office agent	or registered agent, or both, in the State of 1 am familiar with, and accept the obligation	f Florida. Such change was au ons of, Section 607.0505, Flori	thorized da Statu	by th	ne corporation	ration submits this statement for the purpose i's board of directors. I hereby accept the ap	pointment a	s registered :	
SIGNATU	RE		Dagistand A	Anont s	signature required	when reinstating) DATE		<u> </u>	
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applicable.)			gone	arginitate to quive o	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	CTORS IN 12	
TITLE	I PM			1.1 TITLE			☐ Char	nge	
NAME (MAYO, WILLIAM M. JR.		1.2 NAME					}	
STREET ADDR			1.3 STF	REET A	ADDRESS	·		ļ	
CITY-ST-ZIP	PENSACOLA FL 32504	PENSACOLA FL 32504		Y-ST-	ZiP				
TITLE	S			LΕ			☐ Char	nge Addition	
NAME	MAYO, DIANA D.	MAYO, DIANA D. 22N		ME					
STREET ADDR	ESS 5555 PEACHTREE COURT			REETA	ADORESS				
CITY-ST-ZIP	PENSACOLA FL 32504			r <u>y-st</u> -	- ZIP				
TITLE	T	☐ DELETE	3.1 TITLE				☐ Char	nge 🗌 Addition	
NAME	MAYO, WILLIAM M. JR.		3.2 NA						
STREET ADDR			3.3 STF	REETA	ADDRESS .	and a second of the second of	_		
CITY-ST-ZIP	PENSACOLA FL 32504		3.4. CITY-		-ZIP			Addition	
TITLE		☐ DELETE	4.1 TITI		1		Chai	nge Addition	
NAME			4.2 NA	ME					
STREET ADDR	ESS								
	: I				ADDRESS			Ĭ	
CITY-ST-ZIP		[] DELETE	4.4 CIT	Y-ST-			□ C+	nge Addition	
TITLE		☐ DELETE	4.4 CIT 5.1 TIT	Y-ST- LE			☐ Char	nge Addition	
TITLE NAME		☐ DELETE	4.4 CIT 5.1 TIT 5.2 NA	Y-ST- LE ME	ZIP	,	☐ Chai	nge Addition	
TITLE	ESS	☐ DELETE	4.4 CIT 5.1 TIT 5.2 NA 5.3 STI	Y-ST- LE ME REET A	ADDRESS		☐ Char	nge Addition	
TITLE NAME	ESS	☐ DELETE	4.4 CIT 5.1 TIT 5.2 NA	Y-ST- LE ME REET A Y-ST-	ADDRESS		☐ Chai		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Mar 10, 1999 8:00 am Secretary of State

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