**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 490147  1. Entity Name  JOHNSON AIR SERVICE, INC.					Apr 18, 2001 8:00 am Secretary of State 04-18-2001 90111 048 ***150.00				
VENETIAN SHO	ce of Business ORES-Indian Waterways (EY, P.O. BX 792 . 33070	lian Wat	crway	C0047903					
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4.	FEI Number 59-1	633687		oplied For of Applicable	
Zip	Country	Zip	Country	5.	. Certificate of Status [		8.75 Add		
	6. Name and Address of Current Re	egistered Agent		7.	Name and Address	of New Registered Ag	jent		
			Name						
<del>Bay</del> Ven	INSON, GARY L VIEW ISLE DR BOX 192 ETIAN SHORES IMORADA FL 33038	1, 178 Indian rnier, FL 330	May noteet to	udress (P.O.	Box Number is Not Ad		Zip Code	e	
						FL_			
Tax filing	Signature, typed or printed name of registered agent and orration is eligible to satisfy its Intangible requirement and elects to do so, tria on back)	FILE NOW!!! After MAY 1, 2001 Make Check Payable	to Departmen	00 550.00 It of State	10. Election Cam Trust Fund Co	ontribution.	Added	<b>0</b> May Be I to Fees	
11.	OFFICERS AND DI		12.	A	DDITIONS/CHANGES				ź
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, GARY L BAYVIEW ISLE DR., VENETIAN SH ISLAMORADA FL 33036	□ Delete ORES Home	TITLE NAME STREET ADDRESS CITY-ST-ZIP	178 In Tavers	ndian Mound nier FL 3	1 Trail 3070	Change	Addition	70/04/40/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BAY VIEW ISLE DR., VENETIAN SH ISLAMORADA FL 33036	□ Delete HORES Home	TITLE NAME STREET ADDRESS CITY-SY-ZIP	178 I Taver	Indian Mounier, FL	nd Trail 33070	Change	Addition A	į
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSON, GERALD L "BAY VIEW ISLE DR.," VENETIAN SH ISLAMORADA FL 33036		TITLE NAME STREET ADDRESS = CITY-ST-ZIP	178] Taver	Indian Mo	ard Trail	Change	Addition	٠.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Johnson, Gary II Bay View Isle Dr., Venetian Sh Islamorada Fl 33036	□ Delete  Home	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Indian A		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	[	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
indicated of the cor	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower, or on an attachment with an address, with	ue and accurate and that my ered to execute this report as	signature shall h	ave the same	e legal effect as if mad	e under oath; that I am	an officer of Block 11 or	or director	