FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED

95 MAY -1 ... 0:40

TALLAHASSEE, FLORIDA

DOCUMENT # 576776 (9)

1. Corporation Name
94TH AERO SQUADRON OF SARASOTA, INC.

Principal Place of Business	Mailing Address
4155 E LA PALMA AVE SUITE 250 ANAHEIM CA 92807	4155 E LA PALMA AVE SUITE 250 ANAHEIM CA 92807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/23/1978
3a. Date of Last Report: 05/01/1994
4. FEI Number: 95-3309774 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 21 ___ Suite, Apt. #, etc. 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___
2a. Mailing Address 26 ___ Suite, Apt. #, etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. **Name and Address of Current Registered Agent**

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 607.1508, 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 ___ DATE ___

12. OFFICERS AND DIRECTORS

TITLE	DV
NAME	TALLICHET, CECILIA
STREET ADDRESS	4155 E LA PALMA AVE #250
CITY-ST-ZIP	ANAHEIM CA
TITLE	AS
NAME	MCMAHON, JUDITH
STREET ADDRESS	4155 E LA PALMA AVE #250
CITY-ST-ZIP	ANAHEIM CA
TITLE	PD
NAME	TALLICHET, DAVID C., JR.
STREET ADDRESS	4155 E LA PALMA AVE #250
CITY-ST-ZIP	ANAHEIM CA
TITLE	AT
NAME	ROYSE, BOB D.
STREET ADDRESS	4155 E LA PALMA AVE #250
CITY-ST-ZIP	ANAHEIM CA
TITLE	ST
NAME	TALLICHET, CECILIA
STREET ADDRESS	4155 E LA PALMA AVE #250
CITY-ST-ZIP	ANAHEIM CA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(1.1–6.4 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP, each with ☐ Change ☐ Addition — blank)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Cecilia Tallichet V.P. Cecilia Tallichet 4-21-95 7145793900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0393204 CP