

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90460 038 ***150.00

DOCUMENT # 576776

1. Entity 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**

2. Principal Place of Business

8191 E. KAISER BLVD

3. Mailing Address

8191 E. KAISER BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ANAHEIM, CA

City & State

ANAHEIM, CA

4. FEI Number

95-3309774

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TALICHET, CECILIA 4155 E LA PALMA AVE #250 ANAHEIM CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8191 E. KAISER BLVD ANAHEIM, CA 92808-2214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MCMAHON, JUDITH 4155 E LA PALMA AVE #250 ANAHEIM CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8191 E. KAISER BLVD ANAHEIM, CA 92808-2214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TALICHET, DAVID C., JR. 4155 E LA PALMA AVE #250 ANAHEIM CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8191 E. KAISER BLVD ANAHEIM, CA 92808-2214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT ROYSE, BOB D. 4155 E LA PALMA AVE #250 ANAHEIM CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8191 E. KAISER BLVD ANAHEIM, CA 92808-2214
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Vice President John D Tallichet 8191 E Kaiser Blvd Anaheim, CA 92808

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cecilia Tallichet **DATE:** 4-25-02 **DAYTIME PHONE #:** 714 2796100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)