

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90172 028 ***150.00

DOCUMENT # 632979

1. Corporation Name
SILL AVIATION, INC.

Principal Place of Business
**2251 PADDOCK CIRCLE
DUNEDIN FL 34698**

Mailing Address
**2251 PADDOCK CIRCLE
DUNEDIN FL 34698**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/10/1979

4. FEI Number

59-1932727

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 **1003 Kingsway Lane**
Suite, Apt. #, etc.

2a. Mailing Address

26 **1003 Kingsway Lane**
Suite, Apt. #, etc.

City & State

23 **Tarpon Springs, Fl.**
Zip Country

City & State

28 **Tarpon Springs, Fl.**
Zip Country

24 **34689**

25

29 **34689**

30

9. Name and Address of Current Registered Agent

**HUMPHRIES, J. BOB
220 MADISON STREET
TAMPA FL 33602**

10. Name and Address of New Registered Agent

81 Name

Maria Rudisill

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

1003 Kingsway Lane

83

84 City

Tarpon Springs

FL

85 Zip Code
34689

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 **Maria Rudisill MARIA RUDISILL**

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

(NOTE: Registered Agent signature required when reinstating)

4/24/99
DATE

12.

OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **RUDISILL, JASON E.**
STREET ADDRESS **2251 PADDOCK CIRCLE**
CITY-ST-ZIP **DUNEDIN FL 34698-2428**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD

☒ Change ☐ Addition

1.2 NAME

Rudisill, Jason E.
1003 Kingsway Lane
Tarpon Springs, Fl. 34689

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE: **Jason E. Rudisill Jason E. Rudisill** **4/24/99** **727-938-6949**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)