

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 646514

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: MIRACLE STRIP AVIATION, INC.

## Current Principal Place of Business:

1001 AIRPORT ROAD  
DESTIN, FL 32541 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 159  
DESTIN, FL 32540 US

## New Mailing Address:

FEI Number: 59-1952469      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HELMICH, KEVIN M ESQ  
4481 LEGENDARY DR  
STE 200  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

HELMICH, KEVIN M ESQUIRE  
4481 LEGENDARY DRIVE  
SUITE 200  
DESTIN, FL 32541 US

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: KEVIN M. HELMICH

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: VAN ATTA, LEON W  
Address: POST OFFICE BOX 1712  
City-St-Zip: DESTIN, FL 32541 US

Title: CEOD ( ) Delete  
Name: VAN ATTA, COLBY F  
Address: 35 WAYNEL CIRCLE, SE  
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: S ( ) Delete  
Name: ESPADA, KELVIN  
Address: 344 MICHAEL COURT  
City-St-Zip: MARY ESTHER, FL 32569 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change ( ) Addition  
Name: VAN ATTA, LEON W  
Address: POST OFFICE BOX 1712  
City-St-Zip: DESTIN, FL 32541 US

Title: TD (X) Change ( ) Addition  
Name: VAN ATTA, COLBY F  
Address: 35 WAYNEL CIRCLE, SE  
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: SD (X) Change ( ) Addition  
Name: BRIGMAN, MARY  
Address: 1596 PERRY SMITH ROAD  
City-St-Zip: BAKER, FL 32531 US

Title: P ( ) Change (X) Addition  
Name: BRIGMAN, WALTER  
Address: 1596 PERRY SMITH ROAD  
City-St-Zip: BAKER, FL 32531 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALTER BRIGMAN

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date