

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 28 AM 11:57

DOCUMENT # **686727** (9)

1. Corporation Name

ELMORE AIRCRAFT ENGINES SERVICE, INC.

Principal Place of Business

Mailing Address

412 HWY. 301 BLVD. E
BRADENTON FL 34208

411 HWY 30 BLVD E
BRADENTON FL 34208
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/28/1980** 3a. Date of Last Report **04/13/1994**

4. FEI Number **59-2037803** Applied For Not Applicable

5. Certificate of Status Desired \$5.75 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

21. Principal Place of Business **411 HWY 301 BLVD. E.**

26. Mailing Address

22. City & State **BRADENTON FL.**

27. City & State

23. Zip **34208**

28. Zip

24. Country

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELMORE, CHARLES J.
4419 19TH AVENUE WEST
BRADENTON FL 34209

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 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:

Signature of Officer or Director (Required) (Print Name)

Signature of Registered Agent (Required) (Print Name)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **ELMORE, CHARLES J.**
STREET ADDRESS **4419 19TH AVENUE WEST**
CITY ST ZIP **BRADENTON FL**

1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY ST ZIP

TITLE **STD**
NAME **ELMORE, FRANCES CAROL**
STREET ADDRESS **3417 FIRST AVENUE WEST**
CITY ST ZIP **BRADENTON FL**

5. TITLE Change Addition
6. NAME
7. STREET ADDRESS
8. CITY ST ZIP

TITLE **V**
NAME **ELMORE, FRANCES CAROL**
STREET ADDRESS **3417 FIRST AVENUE WEST**
CITY ST ZIP **BRADENTON FL**

9. TITLE Change Addition
10. NAME
11. STREET ADDRESS
12. CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. TITLE Change Addition
14. NAME
15. STREET ADDRESS
16. CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

17. TITLE Change Addition
18. NAME
19. STREET ADDRESS
20. CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21. TITLE Change Addition
22. NAME
23. STREET ADDRESS
24. CITY ST ZIP

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 193.02(4)(b), 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 of this report as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **CHARLES J. ELMORE, JR. PRES./MANAGER** Date **3/23/95** District Number **813-746-3623**