

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **686727** (9)

1. Corporation Name

ELMORE AIRCRAFT ENGINES SERVICE, INC.



Principal Place of Business

Mailing Address

411 HWY 301 BLVD., E.
BRADENTON FL 34208
US

411 HWY 30 BLVD E
BRADENTON FL 34208
US

3. Date Incorporated or Qualified
08/28/1980

3a. Date of Last Report
03/28/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-2037803

Applied For
Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23. City & State

28. City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24. Zip

25. Country

29. Zip

30. Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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**

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

Signature of the individual who is to be appointed as the registered agent

Signature of the individual who is to be appointed as the registered agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ELMORE, CHARLES J.	
STREET ADDRESS	4419 19TH AVENUE WEST	
CITY-STATE-ZIP	BRADENTON FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	ELMORE, FRANCES CAROL	
STREET ADDRESS	3417 FIRST AVENUE WEST	
CITY-STATE-ZIP	BRADENTON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ELMORE, FRANCES CAROL	
STREET ADDRESS	3417 FIRST AVENUE WEST	
CITY-STATE-ZIP	BRADENTON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-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 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 of this report on an attachment with an address.

SIGNATURE:

Charles J. Elmore Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CHARLES J. ELMORE, JR.

2/13/96 941-746-3623

CR2E034 (12/95)