

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**  
**Mar 04, 1999 8:00 am**  
**Secretary of State**

03-04-1999 90205 035 \*\*\*150.00

**DOCUMENT # 686727**

1. Corporation Name

**ELMORE AIRCRAFT ENGINES SERVICE, INC.**

Principal Place of Business

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

Mailing Address

**411 HWY 30 BLVD E  
BRADENTON FL 34208  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/28/1980**

4. FEI Number

**59-2037803**

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

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

1.1 TITLE ☐ Change ☐ Addition

NAME **STD** ☐ DELETE

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

1.2 NAME

NAME **V** ☐ DELETE

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

1.3 STREET ADDRESS

TITLE ☐ DELETE

NAME **STD** ☐ DELETE

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

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME **STD** ☐ DELETE

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

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **STD** ☐ DELETE

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

2.2 NAME

SIGNATURE: **X** **ELMORE, CHARLES J.**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-19-99**

Date

Daytime Phone #

CR2E034 (1/98)