


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90089 005 ****61.25

DOCUMENT # 722830
 1. Entity Name
TAVERNAERO AIRPORT PARK, INC.



Principal Place of Business Mailing Address
 P.O. BOX 171 P.O. BOX 171
 TAVERNIER FL 33070 TAVERNIER FL 33070
 US US



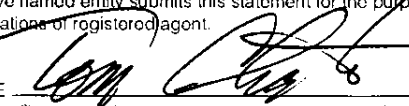

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

4. FEI Number **59-1506689** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FLOBACK, MIRIUM P
180 S AIRPORT ROAD
TAVERNIER FL 33070

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE   DATE **3-30-06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VBB D FIESCHING, ADOLF 101 N AIRPORT RD TAVERNIER FL 33070 <input checked="" type="checkbox"/> Believe <i>change</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LAROCO, JOHN 424 SUNSHINE BLVD. TAVERNIER FL 33070 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WOOD, ANN 192 SOUTH AIRPORT RD. TAVERNIER FL 33070 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PINDER, HENRY 141 N AIRPORT RD TAVERNIER FL 33070 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOSS, DANNY Debby 236 ORCHID ST. TAVERNIER FL 33070 <input checked="" type="checkbox"/> Delete <i>change</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FIOBACK, MIRIAN 180 S AIRPORT RD TAVERNIER FL 33070 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Tom Chasteen 40 mutiny Place Key Largo, FL 33037 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE President Allen Wood 108 Gardenia St. Tavernier, FL 33070 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Jay Feins 135 N. Airport Rd. Tavernier, FL 33070 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Tracy Nyman 119 North Airport Rd. Tavernier, FL 33070 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Brian Lindback 195 North Airport Rd. Tavernier, FL 33070 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ed Yost 115 North Airport Rd. Tavernier, FL 33070 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:   DATE **3-30-06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR