

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740489

1. Entity Name

VALIANT AIR COMMAND, INC.

Principal Place of Business

6600 TICO RD
TITUSVILLE FL 32780

Mailing Address

6600 TICO RD
TITUSVILLE FL 32780

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BROSS TRACHTMAN HENDERSON & CHILDRESS PA
1990 WEST NEW HAVEN AVE
SUITE 201
MELBOURNE FL 32904

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE TD ☐ Delete
NAME HANCE, DONALD R.
STREET ADDRESS 32 YAM DRIVE
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE VD ☒ Delete
NAME DAMOFF, GEORGE
STREET ADDRESS 6250 WHISPERING LANE
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE PD ☐ Delete
NAME LENIE, PIETER
STREET ADDRESS 901 RIVERSIDE DRIVE
CITY-ST-ZIP MELBOURNE FL

TITLE D ☐ Delete
NAME IACUZZO, ALICE M.
STREET ADDRESS 1305 S. ATLANTIC AVE., SUITE 380
CITY-ST-ZIP COCOA BCH. FL

TITLE D ☐ Delete
NAME MORRIS, LLOYD
STREET ADDRESS 1711 JUNIDEN DRIVE
CITY-ST-ZIP EDGEWATER FL

TITLE SD ☒ Delete
NAME KISON, ROBERT
STREET ADDRESS 7230 MOURNING DOVE COURT
CITY-ST-ZIP TITUSVILLE FL 32780

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V/D ☒ Change ☐ Addition
NAME LARKIN, HAROLD
STREET ADDRESS 2310 PAPAYA PLACE
CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S/D ☒ Change ☐ Addition
NAME McCANN, MICHAEL
STREET ADDRESS 3208 CALGARY STREET
CITY-ST-ZIP MELBOURNE, FL 32935

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Donald R. Hance
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD R. HANCE

4/25/01 (321) 268-1941

Date

Daytime Phone #

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90043 028 ****70.00

756511



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1773787

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

CR2E037 (10/00)