


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000000642	
1. Entry Name TALLAHASSEE WINAIR CO.	

Principal Place of Business 870 BLOUNTSTOWN HIGHWAY, UNIT 5 TALLAHASSEE, FL 32304	Mailing Address C/O DAPSCO ATLANTA 1000 HURRICANE SHOALS RD C-100 LAWRENCEVILLE, GA 30043
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05102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 30-0035411	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HARSONY, RICHARD D 870 BLOUNTSTOWN HWY., UNIT 5 TALLAHASSEE, FL 32304
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OSENBOUGH, JACK D 3110 KETTERING BLVD. DAYTON, OH 454391972
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST MUEGEL, PHILLIP E 1000 HURRICANE SHOALS RD C-100 LAWRENCEVILLE, GA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FRY, BENJAMIN G 3110 KETTERING BLVD. DAYTON, OH 454391972
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDICK, DON W 165 KEY CIRCLE DRIVE BRUNSWICK, GA 315202829
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000564941 05/20/06-80095-018 150.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 607, 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 life empowered.

SIGNATURE: <i>Philip E. Muegel</i>	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #
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