


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90400 030 ***150.00

DOCUMENT # F05000003568 1. Entity Name PROP & ROTOR AVIATION, INC.					
Principal Place of Business 1460 RINSON RAY RD BAKER, FL 32531			Mailing Address 1460 RINSON RAY RD BAKER, FL 32531		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1914592	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BUIS, PAULINE 1460 RINSON RAY RD BAKER, FL 32531			7. Name and Address of New Registered Agent Name Roger Buis Street Address (P.O. Box Number is Not Acceptable) 1460 Rinson Ray Rd. City Baker FL FL Zip Code 32531		
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: <u><i>Roger A Buis</i></u> DATE: 4-20-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BUIS, ROGER <input checked="" type="checkbox"/> Delete 1460 RINSON RAY RD BAKER, FL 32531		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Buis Roger 1460 Rinson Ray Rd Baker FL 32531	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input checked="" type="checkbox"/> Delete BUIS, PAULINE 1460 RINSON RAY RD BAKER, FL 32531		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Buis Daniel 1404 Stardust Ln Amarillo, TX 79118	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC <input checked="" type="checkbox"/> Delete BUIS, DANIEL 1460 RINSON RAY RD BAKER, FL 32531		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 like empowered.					
SIGNATURE: <u><i>Roger A Buis</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4-20-2006 <small>Date</small>		850-384-6083 <small>Daytime Phone #</small>