

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000006951

1. Entity Name  
FUN COUNTRY AVIATION, INC.



Principal Place of Business  
401 W TARPON BOULEVARD  
PORT CHARLOTTE, FL 33952

Mailing Address  
401 W TARPON BOULEVARD  
PORT CHARLOTTE, FL 33952

**DO NOT WRITE IN THIS SPACE**

**FILED**  
**Jul 09, 2008 08:00 AM**  
**Secretary of State**



07072008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>82-0355785</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

HANEY, ROBERT F  
401 W TARPON BOULEVARD  
PORT CHARLOTTE, FL 33952

**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

*Robert F. Haney*

(NOTE: Registered Agent signature required when reinstating)

*7 July 08*  
DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP HANEY, ROBERT 401 W TARPON BOULEVARD PORT CHARLOTTE, FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVP HANEY, CARLA 401 W TARPON BOULEVARD PORT CHARLOTTE, FL 33952
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07/09/08-80006-012 158.75

**DO NOT WRITE  
IN THIS SPACE**

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:

*Robert F. Haney*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*7/7/08*  
DATE

Daytime Phone #