PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90076 014 ***150.00

DOC	JMENT	# E0	6056
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1. Corporation	n Name				
NORTHE	ast florida aircraft ma	INTENANCE, INC.			
					1
Principal Place	e of Businesa	Mailing Address			
855 12 ST JOH	ns bluff rd	855-12 ST JOHNS BLUFF RO			
HANGAR 12 JAX FL 32225		CRAIG AIRPORT HANGAR 12 JAX FL 32225		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualifed	
				11/19/1980	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26	<u> </u>		de
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired 5.2.2 \$8.75 Additional	i
22	<u>-</u>	27		Fee Required	_
City & Stat	e	City & State		8. Election Campaign Financing 55.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip 24	Country [25]	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax.	
	9. Name and Address of Current			10. Name and Address of New Registered Agent	
			81 Name	BOURN E RIDGERON SEA	J
	nford, douglas G esq		82 Street	BRYAN E. BLACKBURN, ESq. Address (P.O. Box Number is Not Acceptable)	\dashv
	BOEUF, LAMB, GREENE & MACR	AE, LLP	[02] 3000.7	1921 Dewey PLACE	
	. LAURA STREET., STE 2800		83		
JACI	(SONVILLE FL 32202		84 City	a5 Zin Code	-1
		_		acksonville FL 32207	
11. Pursuant	to the provisions of Sections 697,0502	and 607.1508, Florida Statutes	the above-named	corporation submits this statement for the purpose of changing its registered	1
agent la	m famillar with, and accept the obligation	perof. Section 607.0505, Florid	da Stetules.	1.1.	
agent I a	m familiar with, and acceptine obligation	yer DR	YAN BUP	corporation submits this statement for the purpose of changing its registered brabon's board of directors. I hereby accept the appointment as registered CKBURN	ļ
SIGNATURE	Cignature, tyler or publishe commodel registered again	and the if applicable (NOTE: F	Holosered Agent eigneture in	PLKBLIRN / 7/70 Squired when reinstating) . Day'E	
SIGNATURE	Signature, type or pillable aggregate registered agent of OFFICERS AND	and title if applicable (NOTE: F	YAN DLF Highstered Agent eigneiture in 13.	POLY E ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
SIGNATURE 12.	Eignature, tyler or piritide aggressive registered against OFFICERS AND	and the if applicable (NOTE: F	digistered Agent agneture in 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
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crtv-St-ZP

14. 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 annual report or supplemental ennual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

JOHN W. BOTTENSEK1-4-

CR2E034 (11/98)