

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14230

FILED  
Feb 02, 2007  
Secretary of State

Entity Name: TAMPA BAY AVIATION, INC.

## Current Principal Place of Business:

2633 CAUESWAY BLVD  
PO BOX 5777  
TAMPA, FL 33675

## New Principal Place of Business:

2633 CAUESWAY BLVD  
TAMPA, FL 33675

## Current Mailing Address:

BOX 5777  
PO BOX 5777  
TAMPA, FL 33675

## New Mailing Address:

BOX 5777  
TAMPA, FL 33675

FEI Number: 59-2827047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VERSAGGI, JOSEPH A  
2633 CAUSEWAY BLVD  
TAMPA, FL 33619 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: HALPERN, DAVID,  
Address: 120 S FREEMONT STREET  
City-St-Zip: TAMPA, FL 33606

Title: SD ( ) Delete  
Name: DANCE, TIM,  
Address: 216 E ROBERTSON ST  
City-St-Zip: BRANDON, FL

Title: PD ( ) Delete  
Name: MCCOY ROBERT,  
Address: 3615 E LAKE AVE  
City-St-Zip: TAMPA, FL 33610

Title: TD ( ) Delete  
Name: VERSAGGI, JOE,  
Address: 2633 CAUSEWAY BLVD  
City-St-Zip: TAMPA, FL

Title: VD ( ) Delete  
Name: SCHWABI, FRED  
Address: 1367 OAKFIELD DR  
City-St-Zip: BRANDON, FL 33511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: VERSAGGI, JOSEPH A.,  
Address: 2633 CAUSEWAY BLVD  
City-St-Zip: TAMPA, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH A. VERSAGGI

T/D

02/02/2007

Electronic Signature of Signing Officer or Director

Date