

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F81495

Entity Name: ARTIC AIR, INC.

FILED
Jan 05, 2004
Secretary of State

Current Principal Place of Business:

1501 ST JOHNS AVE
PALATKA, FL 32177 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 911
PALATKA, FL 321780911 US

New Mailing Address:

FEI Number: 59-2195786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CURTIS, MICHAEL E.
1501 ST JOHNS AVE
153 HORSEMANS CLUB RD
PALATKA, FL 32177 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: PD () Delete
Name: CURTIS, MICHAEL E.
Address: 153 HORSEMANS CLUB RD
City-St-Zip: PALATKA, FL

Title: V () Delete
Name: CURTIS, JEFFERY L,
Address: 164 DARIN DR.
City-St-Zip: HOLLISTER, FL 32147

Title: S () Delete
Name: CURTIS, SUZANNE
Address: 153 HORSEMANS CLUB RD
City-St-Zip: PALATKA, FL 32177

Title: T () Delete
Name: CURTIS, BRANDI
Address: 164 DARIN DR
City-St-Zip: HOLLISTER, FL 32147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CURTIS, MICHAEL E.
Address: 153 HORSEMANS CLUB RD
City-St-Zip: PALATKA, FL 32177 US

Title: V (X) Change () Addition
Name: CURTIS, JEFFERY L
Address: 164 DARIN DR.
City-St-Zip: HOLLISTER, FL 32147 US

Title: S (X) Change () Addition
Name: CURTIS, SUZANNE
Address: 153 HORSEMANS CLUB RD
City-St-Zip: PALATKA, FL 32177 US

Title: T (X) Change () Addition
Name: CURTIS, BRANDI
Address: 164 DARIN DR
City-St-Zip: HOLLISTER, FL 32147 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL E. CURTIS

PD

01/05/2004

Electronic Signature of Signing Officer or Director

Date