2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F81495

Entity Name: ARTIC AIR, INC.

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1501 ST JOHNS AVE PALATKA, FL 32177 US

Current Mailing Address: New Mailing Address:

PO BOX 911

PALATKA, FL 321780911 US

FEI Number: 59-2195786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CURTIS, MICHAEL E.

1501 ST JOHNS AVE

153 HORSEMANS CLUB RD

PALATKA, FL 32177 US

CURTIS, MICHAEL E.

1501 ST JOHNS AVE

153 HORSEMAN CLUB RD

PALATKA, FL 32177 US

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: 01/10/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: CURTIS, MICHAEL E. Name: CURTIS, MICHAEL E.

Address: 153 HORSEMANS CLUB RD. Address: 153 HORSEMAN CLUB RD.

Address: 153 HORSEMANS CLUB RD Address: 153 HORSEMAN CLUB RD City-St-Zip: PALATKA, FL 32177 US City-St-Zip: PALATKA, FL 32177 US

Title: V () Delete Title: () Change () Addition Name: CURTIS, JEFFERY L Name:

Address: 164 DARIN DR. Address: City-St-Zip: HOLLISTER, FL 32147 US City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 CURTIS, SUZANNE
 Name:
 CURTIS, SUZANNE

 Address:
 153 HORSEMANS CLUB RD
 Address:
 153 HORSEMAN CLUB RD

 City-St-Zip:
 PALATKA, FL 32177 US
 City-St-Zip:
 PALATKA, FL 32177 US

Title: T () Delete Title: () Change () Addition

 Name:
 CURTIS, BRÀNDI
 Name:

 Address:
 164 DARIN DR
 Address:

 City-St-Zip:
 HOLLISTER, FL 32147 US
 City-St-Zip:

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 01/10/2005