FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000004871 1. Corporation Name

LIBERTY AIRCRAFT, INC.

Principal Place of Business 32 E. CUYAHOGA FALLS AVE Mailing Address

32 E. CUYAHOGA FALLS AVE AKRON OH 44310 AKRON OH 44310

FILED Feb 05, 1999 8:00am **Secretary of State**

02-05-1999 90018 020 ***150.00

3. Date Incorporated or Qualifed



DO NOT WRITE IN THIS SPACE

					09/23/1996			
					4. FEI Number	Applie		
2. Principal Place of Business	2a. Mailing A	Address			34-1791001	Not A	oplicable	
21	26					\$8.75 Add		
Suite, Apt. #, etc.	Suite, Ap	ot. #, etc.			5. Certificate of Status Desired	Fee Requi	red	
_	27				a Figure Companies Financing	\$5.00 Ma	ıv Be	
City & State	City & S	tate			6. Election Campaign Financing Trust Fund Contribution	Added to F		
23 Count	28					ear Intangible		
Zip . Country Zip			Country		8. This corporation owes the current ye	∏Yes □	No	
210	· —	29 30			Personal Property Tax.	tored Agent		
9. Name and Address of Current Registered Agent		ent			10. Name and Address of New Registered Agent			
9. Name and Addi	ress of Current regions	1	81	Name				
FIELDING, WILLIAM			00	Chront Addi	ress (P.O. Box Number is Not Acceptable)			
EISE & EXECUTIVE AIRPORT HANGER #19			82 Street Address (P.O. Box Number is Not Acceptable)					
EXECUTIVE AIRPORT	HANGEN # 10		83		1. 14. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
1020 NW 62ND ST	•••		00			85 Zip Co		
FT LAUDERDALE FL 33	309		84	City				
					poration submits this statement for the purplion's board of directors. I hereby accept the	_ 	gistered	
The Control of the American of St	ections 607 0502 and 607.1508	Florida Statutes, the	he above	e-named corp	ion's hoard of directors. I hereby accept the	appointment as regis	stered	
11. Pursuant to the provisions of or	th, in the State of Florida. Such	change was author	rizeo by Statutes	ine corporati	poration submits this statement for the purpion's board of directors. I hereby accept the	. 10 00		
agent. I am familiar with, and a	ccept the obligations of Section	0			560)	1-12-77		
SIGNATURE No	ame of registered agent and title if applicable	(NOTE: Red	Stered Age	nt signature requir				
isture, typed or printed no	ame of registered agent and title if applicable	, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	Additio	
12.	OFFICERS AND DIRECTORS	DELETE	1.1 TITLE		\$4 x 25 x 55 x	Change		
TITLE CSTD		Deteri	12 NAME		* 1 · · · ·			
NAME PASSEOS, ROSE	MARY							
AND DURANAC TE	ree DR		1.3 STREE	T ADDRESS				
AKDON OH 4430			1.4 CITY-	ST-ZIP		Change	Additio	
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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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicate an