

NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Jul 08, 1999 8:00 am**  
**Secretary of State**  
07-08-1999 90017 008 \*\*\*150.00

DOCUMENT # **F98000006108**

Corporation Name

**AEROLLOYD AIRCRAFT FINANCING & LEASING, INC.**



Principal Place of Business

BOX 780518  
ORLANDO FL 32878

Mailing Address

P.O. BOX 780518  
ORLANDO FL 32878

DO NOT WRITE IN THIS SPACE

Principal Place of Business

**P.O. Box 780516**

2a. Mailing Address

**P.O. Box 780516**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Orlando FL**

City & State

**Orlando FL**

Zip

**32878**

Country

**USA**

Zip

**32878**

Country

**USA**

3. Date Incorporated or Qualified

**11/03/1998**

4. FEI Number

**59-3546813**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TILBURG, JACK V**  
**11929 E. COLONIAL DRIVE, STE 300**  
**ORLANDO FL 32826**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PCD TILBURG, JACK V 11929 E. COLONIAL DR., STE 300 ORLANDO FL	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VST HAASE, HANS R 11929 E. COLONIAL DR., STE 300 ORLANDO FL	<input type="checkbox"/> DELETE	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE:

**HANS R. HAASE, VP**

**06-30-99**

**(407) 281-9095**

CR2E034 (5/99)



**Aircraft Financing & Leasing**

F98000006108  
583472-90017-8

## Memo

**To:** TO WHOM IT MAY CONCERN  
**From:** Hans Haase Ph. 407 281-9095 x 107  
**Date:** 07/01/99  
**Re:** F98000006108

**VIA MAIL**

Dear Ladies and Gentlemen :

Pursuant to my phone conversation with one of your representatives today, please allow me to reiterate why it may have come to a situation, resulting in a non-payment past the deadline of May 1999 for the annual report.

Our Post Office Box number is 780516

Your current records show 780518

While at the post office yesterday, a postal worker ask me if the mail from you , addressed to AeroLloyd but with a incorrect P.O. Box number on the address label, is indeed mail for AeroLloyd. That's how I've got your "2<sup>ND</sup> NOTICE ". Your FIRST NOTICE I've never received. Perhaps because of the incorrect P.O. Box number. Being new in this business , I was not aware of " Annual Reports ". So, I did not expect any mail from your department. Please make a note of the correct P.O. Box number.

I hereby apply to waive the late charge of \$ 400 and enclose my payment of \$ 150. Your consideration is appreciated.

Thank you.

Hans R. Haase

**Confidential**