

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G02847

FILED
Apr 23, 2009
Secretary of State

Entity Name: PROFESSIONAL AIR OF PENSACOLA, INC.

Current Principal Place of Business:

1320 NORTH KIRK ST
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17826
PENSACOLA, FL 32522

New Mailing Address:

FEI Number: 59-2268380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, LARRY C.
900 BREEZY ACRES RD
PENSACOLA, FL 32534 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: THOMPSON, LARRY C.
Address: 900 BREEZY ACRES RD
City-St-Zip: PENSACOLA, FL

Title: T () Delete
Name: THOMPSON, DONNA R.
Address: 900 BREEZY ACRES
City-St-Zip: PENSACOLA, FL 00000, FL

Title: SD () Delete
Name: THOMPSON, DONNA R.
Address: 900 BREEZY ACRES RD
City-St-Zip: PENSACOLA, FL

Title: VD () Delete
Name: THOMPSON, BARRY L.
Address: 1320 NORTH KIRK STREET
City-St-Zip: PENSACOLA, FL

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: VD (X) Change () Addition
Name: THOMPSON, DONNA R
Address: 900 BREEZY ACRES ROAD
City-St-Zip: PENSACOLA, FL 32534

I hereby certify that the information supplied with this filing does not qualify 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: LARRY C. THOMPSON

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date