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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # H44007

AIRCRAFT LEASING OF ORLANDO, INC.

(3)

FILED May 20 1997 8:00am Secretary of State

Principal Place of Business		Mailing Address	Mailing Address		. 86821 01811 01011 91611 84811 01811 1888
6516 MATCHET ORLANDO FL S US		6516 MATCHETT RD ORLANDO FL 32809-5154 US			
				3. Date Incorporated or Qualified 02/22/1985	3a. Date of Last Report 02/27/1996
· .	lace of Business	2a. Mailing Address	,	4. FEI Number	Applied For
Suite, Apt.	# ato	26 Suite, Apt. #, etc.		59-2497184	Not Applicable
22		27 Solid, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30]		Yes No
FFN	9, Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
Televell X &					
6516 MATCHETT RD ORLANDO FL 32809			82 Street	Address (P.O. Box Number is Not Acceptate 6516 MASONE T	(4)
ONIMIDO PL 32009			83	6216 1111 30he 11	NO.
			. 84 City	ORlando	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607 1508, Florida Statu	tes, the above-named	corporation submits this statement for the p	ourness of changing its registered
office or registered agent, or hoty, for 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 agent the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE	16 year	ell			5/15/97
	Signature, typed or printed name of registered ag		11 Registered Agont signature		DVIE 1
12.	P OFFICERS AN	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	
NAME	FERRIEL, K E	Libricit	1.1 ITILE 1.2 NAME	Ferrion Ks.	Ly Change L Addition
STREET ADDRESS	6516 MATCHETT RD		1.3 STREET ADDRESS	Ferriell, KE 6516 marchell Rd	
CITY-ST-ZIP	ORLANDO FL		14 CHY-ST-ZiP	Polado El	,
TITLE	VP	DELETE	211011	View President	Change Addition
NAME	FERRIEL, NORMA J		2.2 NAME	Ferriell, NormAdo	
STREET ADDRESS	6516 MATCHETT RD		23 STREET ADDRESS	6516 marchett Rd	
CITY-ST-ZIP	ORLANDO FL		2 4 CHY-S1-ZIP	Orlando FL	
TITLE		L] DELETE	3.4 TITLE	_	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. C(1Y+S1+Z(P 4.1 TILE		Change Addition
NAME		F-1 presit	4. P. NAME		C Grange C Nagitibil
STREET ADDRESS			4. F MANU. 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C/TY - S1 - Z/P		
TITLE		☐ DELETE	5.1 1111.6		Charige Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	G.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	ov certify that the information supplied	d with this filing does not avail	6.4 CHY-ST-ZIP	taled in Section 119 07/3V// Florida Statuta	e. I further certify that the
14. I do 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 conversion or the ecciver or Irustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if charged, on an attachment with an address.					