2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 02, 2004 8:00 am
Secretary of State
06-18-2004 90002 031 ***150.00

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DOCUMENT # H48895

1. Entity Name
AVION INSURANCE AGENCY INC.

Principal Place of Business	Mailing Address
3700 ~~AIRPORT RD.~~, SUITE 210 BOCA ~~RATON FL~~ 33431	3700 ~~AIRPORT~~ RD., SUITE 210 BOCA ~~RATON~~ FL 33431

100 STARPORT WAY, SANFORD FL 32773

66429316

MOORE CR2E034 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. New		Suite, Apt. #, etc. New	
City & State Address		City & State Address	
Zip	Country	Zip	Country

AVION INSURANCE AGENCY
100 STARPORT WAY
SANFORD, FL 32773
www.AvionInsurance.com

4. FEI Number 59-2523087 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LANGEVIN, ROBERT E. 942 ~~ALLAMANDA DR~~ DEL~~RAY BEACH~~ FL 33483	Name SCOTT LANGEVIN Street Address (P.O. Box Number is Not Acceptable) 5486 WHISPERING MEADOWS CT. City SANFORD FL Zip Code 32771

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 5/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P [redacted] LANGEVIN, ROBERT E. 942 ALLAMENDA DRIVE - 5486 Whispering DELRAY BEACH FL 33483 SANFORD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Meadows CT 32771 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ☐ Delete LANGEVIN, SCOTT M ~~5801 S SABLE CIRCLE~~ 5486 Whispering ~~MARGATE FL 33063~~ SANFORD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Meadows CT 32771 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 5/15/04 407-585-3600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

66429316

AVION
Insurance Agency

June 29, 2004

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

Re: For Profit Corporation – 2004 Uniform Business Report
Avion Insurance Agency, Inc.
Document Number: H48895
FEI Number: 59-2523084
100 Starport Way
Sanford, FL 32773

To Whom It May Concern:

Please find attached a copy of a Florida Department of State letter dated June 21, 2004 stating receipt of my 2004 Uniform Business Report and my payment of $150.00. In addition, I have enclosed a copy of my 2004 Uniform Business Report as submitted.

Please note I never received the 2004 renewal for my Uniform Business Report.

Please also note the address changes as indicated on the enclosed copy of my report.

I respectfully request that the $400.00 late fee be waived due to non-receipt of the 2004 renewal.

Thank you.

Yours truly,

Scott Langevin, President
Avion Insurance Agency, Inc.
100 Starport Way
Sanford, FL 32773