## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 08, 2004 8:00 am DOCUMENT # H78347 **Secretary of State** 1. Entity Name WANER AVIATION, INCORPORATED 03-08-2004 90035 044 \*\*\*158.75 Mailing Address Principal Place of Business PALM BEACH INTERNATIONAL AIRPORT P. O. BOX 18229 54015457 WEST PALM BEACH, FL 33416 WEST PALM BEACH, FL 33406 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02182004 Cha-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 65-0101080 Not Applicable Zip Country Country \$8:75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAVID GAYNES EXP. David M: Gaynes Street Address Attorney at Law David M. Gaynes 2736 Misty Oaks Circle Attorney at Law Royal Palm Beach, FL 33411 2736 Misty Oaks Circle Royal Palm Beach, FL 33411 Zip Code City 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, typed or printed name of registered agent and title if applicables (NOTE: Recistered Acent signature required when reinstating) 9. Election Campaign Financing \$**5.00** May Be FILE NOW!!! FEE IS \$150.00 1 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Deliste THE TITLE JUNIER WAYNE G WAYNE GALLIEN JR. N/ME NAME STREET ADDRESS 16391 EAST BRIGHTDA DRIVE STREET ADDRESS LOXAHATCHEE, FL 334704124 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE PETRONELLA, ROBERT NAME STREET ADDRESS 3702 WEST LAKE ESTATE DRIVE STREET ADDRESS CITY-ST-ZIP DAVIE, FL 33328 CITY-ST-ZIP Delete TITLE Change - Addition TITLE CAMACHO, JOSE NAME MALKE 3360 NW 22ND STREET STREET ADDRESS STREET ADDRESS COCONUT CREEK, FL 33066 CITY-ST-ZIP CITY-ST-ZIP Dellete TITLE 🗂 Change [ ] Addition TITLE WAYNE GAMVER III GARNER, WAYNE (111\_) N/ME NAME 19864 KING FISHER LANE STREET - DORESS STREET ADDRESS CITY-ST-ZIP LOXAHATCHEE, FL 33470 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME MALIF STREET ADDRESS STREET AGGRESS CITY-ST-ZIP CITY-ST-712 ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET - DORESS CITY-ST-7I2 CITY-ST-ZIP

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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 of 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.