

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **H79379** (4)

1. Corporation Name

**J & S AIRCRAFT, INC.**



Principal Place of Business

Mailing Address

**100 AVIATION DR. S.  
NAPLES FL 33942**

**100 AVIATION DR. S.  
NAPLES FL 33942**

3. Date Incorporated or Qualified  
**10/02/1985**

3a. Date of Last Report  
**04/25/1995**

2. Principal Place of Business

2a. Mailing Address

21 **200 AVIATION DRIVE NOR**

26 **200 AVIATION DRIVE N.**

4. FEI Number

**59-2615520**

Applied For

Not Applicable

Suite, Apt #, etc

Suite, Apt #, etc

22 **#4**

27 **#4**

5. Certificate of Status Desired

☐ **\$8.75 Additional  
Fee Required**

City & State

City & State

23 **NAPLES, FLORIDA**

28 **NAPLES, FLORIDA**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

Zip Country

Zip Country

24 **33942-3568** 25 **USA**

29 **33942-3568** 30 **USA**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JOHNSON, JOEL T. JR.  
100 AVIATION DR., S.  
NAPLES FL 33942**

81 Name

**SAME**

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

**200 AVIATION DRIVE N.**

83

84 City

**NAPLES,**

**FL**

85 Zip Code

**33942-3568**

11. 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 of Registered Agent and the applicable

(NOTE: Registered Agent signature required when registering)

DATE

*WAA Jun 6, 1996*

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **PTS**  
STREET ADDRESS **JOHNSON, JOEL T., JR.**  
CITY-ST-ZIP **100 AVIATION DRIVE SO.  
NAPLES FL**

TITLE ☐ DELETE  
NAME **PTD**  
STREET ADDRESS **JOHNSON, JOEL T, JR**  
CITY-ST-ZIP **100 AVIATION DR., S.  
NAPLES FL**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME **SAME**  
1.3 STREET ADDRESS **SAME**  
1.4 CITY-ST-ZIP **200 AVIATION DRIVE NO  
NAPLES, FLORIDA 33942-3568**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME **SAME**  
2.3 STREET ADDRESS **SAME**  
2.4 CITY-ST-ZIP **200 AVIATION DRIVE N.  
NAPLES, FLORIDA 33942-3568**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Printed Name

*Jun 6 1996 643-2500*

CR2E034 (3/96)