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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K62320

(2)

WINTER HAVEN AIR SERVICES, INC.

| Principal Plac | e of Business | Mailin | Mailing Address | | | T IS SINDLY DIN STATE ST | GABUL OLDU OLDU ELOGI BABU OLDU 1001 |
|--|---|------------------|--|--|--|--|--|
| % RICHARD E. PARISH 3000 21ST ST NW WINTER HAVEN FL 33881 | | 3000 21 | % RICHARD E. PARISH 3000 21ST ST NW WINTER HAVEN FL 33881-1282 | | | | |
| | | | | | | 3. Date Incorporated or Qualified 01/27/1989 | 3a. Date of Last Report 03/13/1996 |
| 2. Principal F | Place of Business | 2a. Ma | ailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | | | ************* | 59-2929547 | Not Applicable |
| Suite, Apt. | . #, etc. | ├ ─¬ | iite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional |
| City & State | | 27 | 27 City & Stale | | | Fee Required | |
| 23 | ic | 28 | ty o otale | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be |
| Zip | Country | Zig | | Cou | ntrv | | |
| 24 | 25 | 29 | • | 30 | ··· / | This corporation has liability for Florida Statutes | Yes No |
| .=:1 | 9. Name and Address of Cur | | ed Agent | 1001 | | 10. Name and Address of New Re | |
| PAR | ISH, RICHARD E. | | | *************************************** | 81 Name | | |
| | 21ST ST NW | | | | 82 Street Ad | Idress (P.O. Box Number is Not Acceptat | olo) |
| WIN | TER HAVEN FL 33881 | | | | Onecino | rates (r.o. box realings) is 140t Acceptat | oley |
| | | | | | 83 | | |
| | | | | | 84 City | | 85 Zip Code |
| | | | | | | | FL |
| 11. Pursuant | to the provisions of Sections 607 (| 3502 and 607.1 | 1508, Florida Statu Such change was | ites, the al | ove-named co | orporation submits this statement for the programment for the programment of directors. | ourpose of changing its registered |
| agent la | am familiar with, and accept the ob | ligations of, Se | ection 607.0505, F | lorida Stat | ites. | ration's board of directors. I hereby acce | prime appointment as registered |
| SIGNATURE | | 4.41 18414 1444 | <u>.</u> | | | | |
| 12. | Signature, typed or printed name of registered | | · · · · · · · · · · · · · · · · · · · | | Agent signature rec | quired when reinstating) | DATE |
| THE | OFFICERS A | | | | | ADDITIONOS HANGES TO OFFI | OFFICE AND DIDECTORS IN 16 |
| | l N | NID DIFFECTO | | 13. | 15 | ADDITIONS/CHANGES TO OFFIC | |
| NAME | D PARISH, RICHARD F. | WID DIFFECTO | DELETE | 1.1 TII | · | ADDITIONS/CHANGES TO OFFIC | CERS AND DIRECTORS IN 12 Change Addition |
| NAME STREET ADDRESS | PARISH, RICHARD E. | | | 1.1 TII 1.2 N | ME | ADDITIONS/CHANGES TO OFFIC | |
| STREET ADDRESS | PARISH, RICHARD E. 2500 21ST ST. NW #84 | · · | | 1.1 TII 1.2 NA 1.3 ST | ME REET ADDRESS | ADDITIONS/CHANGES TO OFFIC | |
| STREET ADDRESS CITY-ST-7IP | PARISH, RICHARD E. 2500 21ST ST. NW #84 WINTER HAVEN FL | · | DELETE | 1.1 Til 1.2 NA 1.3 ST 1.4 Cil | ME REET ADDRESS Y+ST-ZIP | ADDITIONS/CHANGES TO OFFIC | Change Addition |
| STREET ADDRESS CITY-ST-7/P TITLE | PARISH, RICHARD E. 2500 21ST ST. NW #84 WINTER HAVEN FL ST | | | 1.1 Til 1.2 NA 1.3 ST 1.4 Ci 2.1 Til | ME REET ADDRESS Y+ST-ZIP LE | ADDITIONS/CHANGES TO OFFIC | |
| STREET ADDRESS CITY-ST-7/P TITLE NAME | PARISH, RICHARD E. 2500 21ST ST. NW #84 WINTER HAVEN FL ST PARISH, LILI A. | | DELETE | 1.1 TIII 1.2 NA 1.3 ST 1.4 CC 2.1 TIII 2.2 NA | ME REET ADDRESS Y+ST-ZIP LE ME | ADDITIONS/CHANGES TO OFFIC | Change Addition |
| STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS | PARISH, RICHARD E. 2500 21ST ST. NW #84 WINTER HAVEN FL ST PARISH, LILI A. 2500 21ST ST. NW #84 | | DELETE | 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST | ME REET ADDRESS Y+ST-ZIP LE ME REET ADDRESS | ADDITIONS/CHANGES TO OFFIC | Change Addition |
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6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 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 corporation or the receiver of justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Blog

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 18 1997 8:00am

Secretary of State