


2005 FOR PROFIT CORPORATION - ANNUAL REPORT

FILED
Jun 30, 2005 08:00 AM
Secretary of State

DOCUMENT # K62320 1. Entity Name WINTER HAVEN AIR SERVICES, INC.	
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Principal Place of Business % RICHARD E. PARISH 3000 21ST ST NW WINTER HAVEN, FL 33881	Mailing Address % RICHARD E. PARISH 3000 21ST ST NW WINTER HAVEN, FL 33881
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06282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2929547	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARISH, RICHARD E.
3000 21ST ST NW
WINTER HAVEN, FL 33881

DO NOT WRITE IN THIS SPACE

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARISH, RICHARD E. 2500 21ST ST. NW #84 WINTER HAVEN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PARISH, LILI A. 2500 21ST ST. NW #84 WINTER HAVEN, FL
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 06/30/05-80001-012 150.00

DO NOT WRITE IN THIS SPACE

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: Richard E. Parish **Richard E. PARISH**

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-28-05 863-293-2501

 Date Daytime Phone #