

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 17 PM 11:45

DOCUMENT # K70693

(2)

1. Corporation Name

RUPP AVIATION, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
03/03/1989

3a. Date of Last Report
08/02/1994

4. FEI Number
65-0110026

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

2a. Mailing Address

21 5151 SW 66th Ave.

26 5151 SW 66th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Palm City, FL

28 Palm City, FL

Zip

Country

Zip

Country

24 34990

25 USA

29 34990

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FOX, M. LANNING
1100 S. FEDERAL HIGHWAY
STUART FL 34994**

81 Name

H. E. Rupp II

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

5151 SW 66th Ave.

83

84 City

Palm City

FL

85 Zip Code
34990

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]

H. E. Rupp II

4-12-95

(Signature must be of person authorized to register and not a corporation)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

RUPP, HERBERT E., II

STREET ADDRESS

5151 SW 66TH AVE

CITY - ST - ZIP

PALM CITY FL

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

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)(d), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13. If changes are made, attach them with an addendum.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON OFFICER OR DIRECTOR

407
4/12/95
287-8046
Daytime Phone #