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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # L33809 (9)
1. Corporation Name
FLYING FISH AIRWAYS, INC.

Principal Place of Business Mailing Address
2392 ALLEN COURT LANTANA FL 33462 **2392 ALLEN COURT LANTANA FL 33462**

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified **11/29/1989** 3a. Date of Last Report **05/01/1994**
4. FEI Number **65-0169606** 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**
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **1001 US Hwy 1, North** 26 **1001 North U.S.Hwy 1**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **Suite 800** 27 **Suite 800**
City & State City & State
23 **Jupiter, FL** 28 **Jupiter, FL**
Zip Country Zip Country
24 **33477** 25 **USA** 29 **33477** 30 **USA**

9. Name and Address of Current Registered Agent
~~**KINGHT, RALPH WILLIAM**~~
~~**2392 ALLEN COURT**~~
~~**LANTANA FL 33462**~~
No longer Agent

10. Name and Address of New Registered Agent
81 Name **HUNTER S. WILSON**
82 Street Address (P.O. Box Number is Not Acceptable) **1001 NORTH U.S. HWY ONE**
83 **SUITE 800**
84 City **JUPITER** FL 85 Zip Code **33477**

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 *Hunter S. Wilson* **Hunter S. Wilson Secty/Treasurer** DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	KINGHT, RALPH WILLIAM <i>No longer Director</i>
STREET ADDRESS	2392 ALLEN COURT
CITY - ST - ZIP	LANTANA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Ellen M. Perry
13 STREET ADDRESS	1001 North US Hwy. One, Ste 800
14 CITY - ST - ZIP	Jupiter, FL 33477
21 TITLE	S/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Hunter S. Wilson
23 STREET ADDRESS	1001 North US Hwy. One, Ste 800
24 CITY - ST - ZIP	Jupiter, FL 33477
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 110.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am not an agent with an address.

SIGNATURE: *Hunter S. Wilson* **3/24/95** **407/746-8444**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signature Here)