


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L39470
1. Entity Name
PHILLIPS AVIATION, INC.



Principal Place of Business Mailing Address
222 CESSNA BLVD 222 CESSNA BLVD
PORT ORANGE, FL 32128 US PORT ORANGE, FL 32128 US

DO NOT WRITE IN THIS SPACE



03152006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-2987019 Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent
PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH, FL 32114

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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 resigning) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

1100000472020
03/23/06-80020-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PHILLIPS, KEITH E. 2641 SLOW FLIGHT DR DAYTONA BCH, FL 32128
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 fees empowered.

SIGNATURE: Keith E. Phillips KEITH E. PHILLIPS 15 MAR 06 386-788-9528
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #