

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003850

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: ANGEL FLIGHT INC.

## Current Principal Place of Business:

28 SKY LANE  
HOLT, FL 32564

## New Principal Place of Business:

1961 TRI-COUNTY AIRPORT RD  
BONIFAY, FL 32425

## Current Mailing Address:

28 SKY LANE  
HOLT, FL 32564

## New Mailing Address:

3204 MOSS RD  
BONIFAY, FL 32425

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETERSON, HAL  
28 SKY LANE  
HOLT, FL 32564 US

## Name and Address of New Registered Agent:

PETERSON, HAL  
1961 TRI-COUNTY AIRPORT RD  
BONIFAY, FL 32425 US

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.

SIGNATURE:

04/24/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: PETERSON, HAL  
Address: 28 SKY LANE  
City-St-Zip: HOLT, FL 32564

Title: D ( ) Delete  
Name: FABRIGA, JOSE  
Address: 28 SKY LANE  
City-St-Zip: HOLT, FL 32564

Title: D ( ) Delete  
Name: CRAWFORD, HUSTON  
Address: 28 SKY LANE  
City-St-Zip: HOLT, FL 32564

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PETERSON, HAL  
Address: 1961 TRI-COUNTY AIRPORT RD  
City-St-Zip: BONIFAY, FL 32425

Title: D (X) Change ( ) Addition  
Name: HOWARD, SHAWN  
Address: 1961 TRI-COUNTY AIRPORT RD  
City-St-Zip: BONIFAY, FL 32425

Title: D (X) Change ( ) Addition  
Name: RODRIGUES, JOHN  
Address: 1961 TRI-COUNTY AIRPORT RD  
City-St-Zip: BONIFAY, FL 32425

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAL D PETERSON

DP

04/24/2006

Electronic Signature of Signing Officer or Director

Date