

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2008 8:00 am
Secretary of State

02-21-2008 90023 028 ****61.25

DOCUMENT # N05000008287

1. Entity Name
JAG AIR, INC.



Principal Place of Business
6815 DAIRY RD
ZEPHYRHILLS, FL 33542

Mailing Address
6815 DAIRY RD
ZEPHYRHILLS, FL 33542

DO NOT WRITE IN THIS SPACE



01172008 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-3336851

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAGGETT, JUDSON B
6815 DAIRY RD
ZEPHYRHILLS, FL 33542

**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 *Judson B. Baggett*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/9/08
DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME SAMPLE, GRAY
STREET ADDRESS 3603 LIGHTNER DR
CITY-ST-ZIP TAMPA, FL 33629

TITLE D
NAME KELLY, ALLAN
STREET ADDRESS 6842 Pine Springs DR
5710 AUTUMN SHINE DR
CITY-ST-ZIP ZEPHYRHILLS, FL 33541 Wesley Chapel, FL 33544

TITLE D
NAME BAGGETT, JUDSON B
STREET ADDRESS 6815 DAIRY RD
CITY-ST-ZIP ZEPHYRHILLS, FL 33542

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 617, 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: *Judson B. Baggett*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/08 (813) 947-3343
Date Daytime Phone #