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FILED

Jan 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N06171 (5)

1. Corporation Name

THE R/C WORLD FLYERS, INC.



Principal Place of Business

Mailing Address

BOX 10900 INSIDE LOOP
ORLANDO FL 32825
USBOX 10900 INSIDE LOOP
ORLANDO FL 32825
US3. Date Incorporated or Qualified
11/14/19843a. Date of Last Report
01/25/1996

2. Principal Place of Business

21 INSIDE LOOP

2a. Mailing Address

26 10900 INSIDE LOOP

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 ORLANDO FL

City & State

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2461676

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOCKWOOD, HARRY J. JR.
10921 FAIR HAVEN WAY
ORLANDO FL 32825

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETE
NAME ERMINGER, LEE
STREET ADDRESS 3515 BATTERSEA CT.
CITY-ST-ZIP ORLANDO FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE PD ☐ DELETE
NAME LOCKWOOD, HARRY J. JR.
STREET ADDRESS 10921 FAIR HAVEN WAY
CITY-ST-ZIP ORLANDO FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE SD ☒ DELETE
NAME DUTTON, ROY
STREET ADDRESS 3225 CULLEN LAKE SHORE
CITY-ST-ZIP ORLANDO FL3.1 TITLE ☒ Change ☒ Addition
3.2 NAME CHRIS BELL
3.3 STREET ADDRESS 9283 LAKE SHARP CT
3.4 CITY-ST-ZIP ORLANDO, FL 32817TITLE TD ☒ DELETE
NAME DUTTON, ROSS S.
STREET ADDRESS 1613 ILLINOIS ST. APT. 3
CITY-ST-ZIP ORLANDO FL4.1 TITLE ☒ Change ☒ Addition
4.2 NAME TD JIM IANNUZZI
4.3 STREET ADDRESS 1444 SKYBOLT CT.
4.4 CITY-ST-ZIP ORLANDO, FL 32825TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: VD

Signature and typed or printed name of signing officer or director

1-13-97

(407) 851-3167

Date

Daytime Phone # 0077888

CR2E037 (9/96)