

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2001 8:00 am
Secretary of State

03-02-2001 90103 038 ****61.25

DOCUMENT # N12906

1. Entity Name

SEMINOLE AVIATION ASSOCIATION, INC.

Principal Place of Business

**5610 KENNY DRIVE
TAMPA FL 33617
US**

Mailing Address

**5610 KENNY DRIVE
TAMPA FL 33617
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCLINSKEY, TOM
5610 KENNY DRIVE
TAMPA FL 33617**

Name

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

City

FL

Zip Code

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.

SIGNATURE

Tom McLinskey

Treasurer/Director

2/25/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDS MCKINSLEY, TOM 5610 KENNY DRIVE TAMPA FL 33617	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCKAY, HARRY 8412 TUPELO DRIVE TAMPA FL 33637	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCKINSKEY, TOM 5610 KENNY DRIVE TAMPA FL 33617	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANSMA, D 3110 LK ELLEN DR TAMPA FL 33618	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNAPP, R 12350 THONOTTOSASSA RD THONOTOSASSA FL 33572	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLMSTEAD, STEEL 9708 CYPRESS SHADOW AVE TAMPA FL 33647	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer, Director, Secretary MCLINSKEY, Thomas P. 5610 KENNY DRIVE TAMPA FL 33617	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President, Director MCKAY, HARRY 8412 TUPELO DRIVE TAMPA FL 33637	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	McLinskey, Thomas P. 5610 KENNY DRIVE TAMPA FL 33617	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President, Director HANSMA, DAVID 3110 LK ELLEN DR TAMPA FL 33617	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 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: *Thomas P McLinskey* *Treasurer/Director* *02/25/01* *813-988-4540*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)