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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N34034** (1)

1. Corporation Name

ORLANDO AIR CARGO ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1031 WEST MORSE BLVD SUITE 105 WINTER PARK FL 32789 US	1031 WEST MORSE BLVD SUITE 105 WINTER PARK FL 32789-3738 US

3. Date Incorporated or Qualified: 09/05/1989
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 | Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 | Country — 30

4. FEI Number: 46-4762378 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

APPLETON, MICHAEL J.
111 N ORANGE AVE
SUITE 1019
ORLANDO FL 32801

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title, if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	XX DELETE	1.1 TITLE	DP	XX Change ☐ Addition
NAME	NOELL, DAVID		1.2 NAME	MILLER, JEANNE	
STREET ADDRESS	4121 CENTERPROT STREET		1.3 STREET ADDRESS	8440 TRADEPORT DR., STE 109	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	ORLANDO, FL 32827	
TITLE	DV	XX DELETE	2.1 TITLE	DV	XX Change ☐ Addition
NAME	ST. AMAND, KEN		2.2 NAME	DEARBORN, PHYLLIS	
STREET ADDRESS	9675 TRADEPORT DRIVE		2.3 STREET ADDRESS	8249 PARKLINE BLVD., STUIE 400	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	ORLANDO, FL 32809	
TITLE	DT	XX DELETE	3.1 TITLE	DT	XX Change ☐ Addition
NAME	MILLER, JEANNE		3.2 NAME	GATES, KAREN	
STREET ADDRESS	1313 E. LANDSTREET RD.		3.3 STREET ADDRESS	8440 TRADEPORT DR., STE 109	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	ORLANDO, FL 32827	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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: Jeanne Gates 07/02/97 407-856-4334