

2002 UNIFORM BUSINESS REPORT (UBR)

0005084

DOCUMENT # N34034

1. Entity Name

ORLANDO AIR CARGO ASSOCIATION, INC.

Principal Place of Business

1031 WEST MORSE BLVD
SUITE 105
WINTER PARK FL 32789
US

Mailing Address

P.O. BOX 622011
ORLANDO FL 32862-2011

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

46-4762378

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

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

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 : DP ☒ Delete
NAME DEARBORN, PHYLLIS
STREET ADDRESS 8249 PARKLINE BLVD, SUITE 400
CITY-ST-ZIP ORLANDO FL 32809

TITLE NAME DP ☒ Change ☐ Addition
STREET ADDRESS JEANNE PORTER
CITY-ST-ZIP 575 BENFORD ROAD
ORLANDO, FLORIDA #e*e&

TITLE : DT ☒ Delete
NAME PIKEL, PAUL
STREET ADDRESS 8249 PARKLINE BLVD; SUITE 400
CITY-ST-ZIP ORLANDO FL 32809

TITLE NAME DT ☒ Change ☐ Addition
STREET ADDRESS LAURENCE KAHN
CITY-ST-ZIP 3203 LAWTON ROAD SUITE 130
ORLANDO, FLORIDA #e*)#

TITLE : DS ☒ Delete
NAME HAUKE, LISA
STREET ADDRESS 2425 E LANDSTREET RD #300
CITY-ST-ZIP ORLANDO FL 32824

TITLE NAME DS ☒ Change ☐ Addition
STREET ADDRESS MARIAN GALLAGHER
CITY-ST-ZIP 9575 BENFORD ROAD
ORLANDO, FLORIDA #e*e&

TITLE : ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 000008303800--0
CITY-ST-ZIP -10/10/02--01027--027
****236.25 ****236.25

TITLE : ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE : ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED

October 4, 2002

407-695-8155

CR2E037 (4/02)



DO NOT WRITE IN THIS SPACE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA