2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 02, 2005 8:00 am **Secretary of State** DOCUMENT # N94000005857 03-02-2005 90092 006 ****61.25 PENSACOLA FREE FLIGHT TEAM, INC. Principal Place of Business Mailing Address 984 WILLIAMS DITCH FOAD 984 WILLIAMS DITCH FOAD CANTONNENT, FL. 32533 CANTONMENT, FL 32533 3. Mailing Address 2. Principal Place of Business 312 FOREST HILLS DRIVE 312 FOREST HILLS DRIVE Suite, Apt. #, etc. 02252005 CR2E037 (10/03) Cha-NP 4. FEI Number 59-3307411 Applied For City & State City & State CANTO UMENT Not Applicable ANTONMENT Country Country \$8.75 Additional 5. Certificate of Status Desired ESCAMBIA 32533 Fee Required ESCAMBIA 6. Name and Address of Current Registered Agent--7. Name and Address of New Registered Agent GRABSKI JUNK, ROBERT W Street Address (P.O. Box Number is Not Acceptable) 3(2 FORES THILLS DRIVE 984 WILLIAMS DITCH ROAD CANTONMENT, FL 32533 Zip Code 32533 CANTONMENT 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. 2/28/5 AUL GRABSICI SIGNATURE _ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PDC **D**elete TITLE TITLE JUNK, ROBERT NAME GRABSKI, PAUL NAME 312 FOREST HILLS DRIVE STREET ADDRESS 984 WILLIAMS DITCH RD. STREET ADDRESS CANTONMENT, FL 32533 CITY-ST-ZIP CITY-ST-ZIP CANTON MENT, FL 31533 ☐ Delete TITLE TITLE LAWRENCE, DON NAME NAME STREET ADDRESS 107 NORWICH RD. STREET ADDRESS CITY-ST-ZIP GULF BREEZE, FL 32561 CITY-ST-ZIP STD- · -Addition TITLE TITLE 🗖 Delete WHITE, GEORGE IT. 5428 HERMITAGE DRIVE GRABSKI, PAUL NAME NAME STREET ADORESS 312 FOREST HILLS DR STREET ADDRESS CITY-ST-7IP CANTONMENT, FL 32533 PENSALULA, FL 32504 CITY-ST-ZIP ☐ Change Addition TITLE X Delete TITLE ADKINS, EMMETT KLINGAMAN, JEROME NAME NAME 951 GRANT PARK DRIVE 1413 EAST LAKEVIEW AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MUBILE, AL 36606 PENSACOLA, FL 32503 CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE

12. I hereby certify that the information supplied with this filing does not quality 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.

STREET ADDRESS

CITY-ST-ZIP

'NAME

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

George H. White 3/1/05 850-478-0866
EN ON DIRECTOR Dayline Phone # SIGNATURE