2002 UNIFORM BUSINESS REPORT (UBR) FILED Apr 16, 2002 8:00 am Secretary of State DOCUMENT # N9500001336 1. Entity Name SAN-JEAN FLYING CLUB, INC. 04-16-2002 90063 039 ****61.25 Principal Place of Business Mailing Address C/O CARL GREENE C/O CARL GREENE 4656 POND APPLE DR N 4656 POND APPLE OR N NAPLES FL 34119 NAPLES FL 34119 2. Principal Face of Business Own 3. Mailing Captiess 5. J, COLCOMBE 6891 COMPTON 6891 COMPTON LANE 5 Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For NOT APPLICABLE NAPLES APLES Not Applicable Country USA \$8.75 Additional Fee Required Zip .5. Certificate of Status Desired _ - - = == 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent COLCOMBE Street Address (P.O. Box Number is Not Acceptable) COOPER, DAVID 793 97TH AVENUE 6891 COMPTON ムル 5 NAPLES FL 34108 NAPKKS 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 ne of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. **Change** ☐ Delete TITI F ☐ Addition TITLE COOPER, DAVID NAME COOPER, DAVID NAME 793 974 AVET NTH. STREET ADDRESS STREET ADDRESS 793 97TH AVE NTH CITY-ST-7IP CITY-ST-ZIP NAPLES FL 34108 NAPLES FL 34108 Change ☐ Addition ☐ Defete TITLE TITLE COLCOMBE STANLEY D COLCOMBE, STANLEY J NAME NAME 0891 COMPTONLW.S STREET ADDRESS STREET ADDRESS 6891_COMPTON LA NAPKES, FL 34104 CITY_ST_7IP CITY-ST-ZIP NAPLES FL 33962 GERNOF, SCHWETZ TITLE Change ★ Addition TITLE Delete Delete MADDEN, JOHN NAME NAME 481 GRAY COURT MARCO, ISLAND FL 34145 STREET ADDRESS 5278 FOX HOLLOW DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 vps Change ☐ Addition TITLE ☐ Delete TITLE MINER, BRUCE MINER, BRUCE NAME NAME 6755 HUNTINGTONLKS CIR. UN. 201 STREET ADDRESS 222 WILOUGHBY DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL NAPLES DΡ Delete TITLE ☐ Addition TITLE GREEN, CARL GREENE, CARL NAME NAME 4656 POND APPLE DR.N. 4651 GULFSHORE BLVD., #1407 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL CITY-ST-ZIP ☐ Change Addition TITLE TITLE 📈 Delete MULDER MCDONOUGH, BRYAN MARIANNE NAME NAME 6891 COMÉTON LNS, 3410 SEMINOLE AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPKS CITY-ST-7IP Naples FL

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:

239-353 0915

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #