FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

> Secretary of State, DIVISION OF CORPORATIONS

1996

N95000004866 (8) DOCUMENT #
1. Corporation Name

R. A. AIRPORT, INC.													
Pri	ncipal Place o	f Business			Ма	iling Address				F (MULTIN) ALO IDIOI DITEI BUILI ADILI	BBIII BBI	DI MBARI BINNE INICO	Blidf fill fabl
19365 N.W. 80TH DRIVE 19365 N.W. 80TH DRIVE OKEECHOBEE FL 34972 OKEECHOBEE FL 34972													
										3. Date Incorporated or Qualified 10/13/1995	3a.	Date of Last F	leport
2.	Principal Plac	e of Busine	ess	-	2a.	Mailing Address				4. FEI Number		├ ─┼	pplied For
21				26	19915 NW	801	H PRIV	/E	INOLES65-06497	64		ot Applicable	
Suite, Apt. #, etc.				\vdash	Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional lequired	
22 19915 NW SOTH DRIVE			City & State				6. Election Campaign Financing) May Be			
-	City & State		- E		28	OKEECHOUE		FL		Trust Fund Contribution		•	to Fees
23	OKEE C	HOBE	Country	~	201	Zip	_	intry	-	8. This corporation has liability for i	ntangibl	le tax under s.	199.032,
24	3497	2	25 US A		29	B4972	30	USA	i	Florida Statutes	Yes	₽ No	
<u> </u>		9. Name	and Address	of Current	Regis	tered Agent				10. Name and Address of New R	egister	ed Agent	
								81 Name	κ_{ν}	ssell JAN. S	_		
MARTIN, GEORGE								82 Street Address (P.O. Box Number is Not Acceptable)					
19365 N.W. 80TH DRIVE								83 24	204	Paradese Power_	Raas	d	
OKEECHOBEE FL 34972								183					
	•							B4 City	3 /	D / 6 /			Code
-		the provide	inno of Contino	617.0502	and 61	7 1509 Florida Statute	s the ah	our payod o	ornorati	on submits this statement for the pur	pose of	changing its re	34/0 egistered office
''							d by the	corporation's	s board	of directors. Thereby accept the app	ointmen	it as registered	agent. Lam
						0503, Florida Statutes.		Λ	16	?. <i>Ill</i>	5	-6-96	5
S	GNATURE 👡	JAN 5	· BLKSE// or printed name, of r	eustered agent a	€277 v and title if	about abile INOI	ir Registre	Agent Signatura	#		DAT	Γŧ	
13				ICERS AND			1/3			ADDITIONS/CHANGES TO OFF	ICERS.		
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N/	AME		IAN, LOUIS	-4			1	NAME	Po	ITS, JOHN R 915 NW 80TH ORIV	E		
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1 -	·		CHOBEE FL				1	CITY-SI-ZIP	PA	LM BEACH GARDENS	FI	(33410	
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N	ame						5.2	NAME		***61.25			
s	TREET ADDRESS						53	STREET ADDRESS	3				
c	ITY-ST-ZIP							CITY-ST-ZIP				Chart	- Add tion
T	ITLE					DELETE		TITLE	-			Change	Addition
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s	TREET ADDRESS						63	STREET ADDRESS	5				N/S/N
C	IITY - ST - ZIP						6.4	CITY - ST - ZIP		the angestion stated in Continue 146	07/21/1	A Florida Statut	tos I fullifler

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

MATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TREASURER 4-24-96 (407) 439 - 8085