

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006044

FILED  
Mar 19, 2008  
Secretary of State

**Entity Name:** CRAIG FIELD EXECUTIVE HANGARS, INC.

**Current Principal Place of Business:**

855-7 ST JOHNS BLUFF RD N  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2947  
JACKSONVILLE, FL 32203 US

**New Mailing Address:**

**FEI Number:** 59-3381042

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCARTHY, EDWARD III  
1301 RIVERPLACE BLVD  
JACKSONVILLE, FL 32207 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DV ( ) Delete  
Name: HAYES, BILL  
Address: 11635 HIDDEN HILLS DR S  
City-St-Zip: JACKSONVILLE, FL 32225

Title: DP ( ) Delete  
Name: DUDLEY, A T  
Address: 1010 EAST ADAMS STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: DS ( ) Delete  
Name: DARNALL, JEFFERY D  
Address: 7319 RAMOTH DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: DV ( ) Delete  
Name: WEANER, JOEL  
Address: 11904 WALLE DR.  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DV ( ) Delete  
Name: CLYNE, PATRICK  
Address: 1210 OCEAN FRONT  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: DT ( ) Delete  
Name: BLOUNT, RICHARD W  
Address: 2304 SHIPWRECK CIRCLE W  
City-St-Zip: JACKSONVILLE, FL 32224

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. THOMAS DUDLEY

DP

03/19/2008

Electronic Signature of Signing Officer or Director

Date