

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90078 023 ***150.00

DOCUMENT # P00000079426

1. Entity Name

EXECUTIVE FLIGHTLINE, INC.

Principal Place of Business

**1585 AVIATION CENTER PKWY. STE. 603
 DAYTONA BEACH FL 32114**

Mailing Address

**1585 AVIATION CENTER PKWY. STE. 603
 DAYTONA BEACH FL 32114**

2. Principal Place of Business

1624 AVIATION CENTER PKWY.

3. Mailing Address

1624 AVIATION CENTER PKWY.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DAYTONA BEACH, FL

City & State

DAYTONA BEACH, FL

4. FEI Number

59-3680742

Applied For

Not Applicable

Zip

32114

Country

USA

Zip

32114

Country

USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LAVIGNA, MICHELE S

**1585 AVIATION CENTER PKWY, STE. 603
 DAYTONA BEACH FL 32114**

7. Name and Address of New Registered Agent

Name
LAVIGNA, Michele S.

Street Address (P.O. Box Number is Not Acceptable)

1624 AVIATION CENTER PARKWAY

City
DAYTONA BEACH

FL

Zip Code
32114

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

Michele S. Lavigna **MICHELE S. LAVIGNA**

2/27/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See Criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
PD
 NAME
LAVIGNA, MICHELE S
 STREET ADDRESS
1585 AVIATION CENTER PKWY, STE. 603
 CITY-ST-ZIP
DAYTONA BEACH FL 32114

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PD
 NAME
LAVIGNA, Michele S.
 STREET ADDRESS
801 PELICAN BAY DRIVE
 CITY-ST-ZIP
DAYTONA BEACH, FL 32119

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michele S. Lavigna **MICHELE S. LAVIGNA, PRESIDENT** **2/27/02** **386-248-0458**

Date

Daytime Phone #

CP2E034 (9/01)