

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000092725

Entity Name: HELIWORKS, INC.

FILED
May 02, 2006
Secretary of State

Current Principal Place of Business:

2400 AIRPORT BLVD
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

2400 AIRPORT BLVD
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3673562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIMPSON, STEPHEN C
Address: 2707 ASHBURY LANE
City-St-Zip: CANTONMENT, FL 32533

Title: VP () Delete
Name: SIMPSON, RICHARD J
Address: 1566 PELICAN POINT DR.
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: BUIS, ROGER A
Address: 1460 VINSON RD.
City-St-Zip: BAKER, FL 32531

Title: M () Delete
Name: BAKER, DAN D
Address: 2143 ANTILLES
City-St-Zip: PENSACOLA, FL 32506

Title: M (X) Delete
Name: EMMONS, BILL F
Address: 2400 AIRPORT BLVD
City-St-Zip: PENSACOLA, FL 32504

Title: M (X) Delete
Name: BRYAN, JOHN C
Address: 4921 BLUFFTON
City-St-Zip: BLUFFTON, SC 29910

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:

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Address:
City-St-Zip:

Title: () Change () Addition
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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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN C. SIMPSON

P

05/02/2006

Electronic Signature of Signing Officer or Director

Date