

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000035043

Entity Name: BALD EAGLE AVIATION, INC.

FILED
Nov 04, 2004
Secretary of State

Current Principal Place of Business:

297 GASTIN STREET
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

297 GASTIN STREET
PORT CHARLOTTE, FL 33953

New Mailing Address:

FEI Number: 65-1094401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLENN, HAPPE
297 GASTIN ST
PORT CHARLOTTE, FL 33953 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HAPPE, GLENN
Address: 297 GASTIN STREET
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: SV () Delete
Name: HAPPE, LINDA
Address: 297 GASTIN STREET
City-St-Zip: PORT CHARLOTTE, FL 33953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: GLENN HAPPE

PTD

11/04/2004

Electronic Signature of Signing Officer or Director

Date