

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000089351

FILED
Jan 08, 2002
Secretary of State

Entity Name: ORANGE COAST AIR, INC.

Current Principal Place of Business:

14831 ROBERTS BARN RD
DADE CITY, FL 33523

New Principal Place of Business:

Current Mailing Address:

14831 ROBERTS BARN RD
DADE CITY, FL 33523

New Mailing Address:

P O BOX 1206
SAN ANTONIO, FL 33576

FEI Number: 59-3747988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, JESSIE J
14831 ROBERTS BARN RD
DADE CITY, FL 33523

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLLINS, JESSIE J
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: COLLINS, BERNICE A
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: COLLINS, GERALD A
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: COLLINS, MARK A
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: COLLINS, CYNTHIA D
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: LOFFLER, BARRY
Address: 244 HARBOUR DRIVE EAST
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLLINS, JESSIE J
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

Title: V (X) Change () Addition
Name: COLLINS, BERNICE A
Address: 14831 ROBERTS BARN RD
City-St-Zip: DADE CITY, FL 33523

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 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: JESSIE J. COLLINS

P

01/08/2002

Electronic Signature of Signing Officer or Director

_____ Date