


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 30, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000089351</b>	
1. Entity Name ORANGE COAST AIR, INC.	

Principal Place of Business 2621 GIANTS PLACE SEFFNER, FL 33584 US	Mailing Address P O BOX 595 SEFFNER, FL 33583 US
--	--

**DO NOT WRITE IN THIS SPACE**



01222007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3747988	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

INMAN, WILLIAM R  
2621 GIANTS PLACE  
SEFFNER, FL 33583

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES INMAN, WILLIAM R 2621 GIANTS PLACE SEFFNER, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COLLINS, JESSIE J 14831 ROBERTS BARN RD DADE CITY, FL 33523
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA INMAN, WILLIAM R 2621 GIANTS PLACE SEFFNER, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC INMAN, WILLIAM R 2621 GIANTS PLACE SEFFNER, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000683836  
04/06/07-80008-011 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X  x 4-23-07 (813) 684-7866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #