

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000120288

FILED
Apr 08, 2002 8:00 AM
Secretary of State

Entity Name: DREAMLAND AVIATION, INC.

Current Principal Place of Business:

12581 EQUESTRIAN CIR., #1011
FT. MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12581 EQUESTRIAN CIR., #1011
FT. MYERS, FL 33907

New Mailing Address:

FEI Number: 03-0379484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEERSTRA, JACOB RICHARD
12581 EQUESTRIAN CIR., #1011
FT. MYERS, FL 33907

Name and Address of New Registered Agent:

SPEERSTRA, JACOB R
12581 EQUESTRIAN CIR., #1011
FT. MYERS, FL 33907

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: JACOB SPEERSTRA

04/08/2002

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: DP () Delete
Name: SPEERSTRA, JACOB RICHARD
Address: 12581 EQUESTRIAN CIR., #1011
City-St-Zip: FT. MYERS, FL 33907

Title: DST () Delete
Name: SPEERSTRA, JAMES R
Address: 2333 POWELL TRAIL
City-St-Zip: ABBEVILLE, AL 36310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SPEERSTRA, JACOB R
Address: 12581 EQUESTRIAN CIR., #1011
City-St-Zip: FT. MYERS, FL 33907

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: JACOB SPEERSTRA

DP

04/08/2002

Electronic Signature of Signing Officer or Director

Date