

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 MAR 18 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000010011 1. Entity Name ABOVE & BEYOND AIRCRAFT, INC.					
Principal Place of Business 212 LANSING ISLAND DRIVE INDIAN HARBOR BEACH, FL 32937			Mailing Address 212 LANSING ISLAND DRIVE INDIAN HARBOR BEACH, FL 32937		
2. Principal Place of Business Suite Apt # etc:		3. Mailing Address c/o 210 N. WYMORE ROAD Suite Apt # etc:			
City & State		City & State WINTER PARK, FL		4. FLE Number Applied For ☐ Not Applicable	
Zip 32789 Country		Zip 32789 Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CATHCART, CHRISTOPHER C 210 N. WYMORE ROAD WINTER PARK, FL 32789				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent Signature required when creating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEREFORD, ROBERT 212 LANSING ISLAND DRIVE INDIAN HARBOR BEACH, FL 32937		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:			1/31/04 407-306-0570		
ROBERT HEREFORD, DIRECTOR					