

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054331

FILED  
Jan 16, 2004  
Secretary of State

**Entity Name:** INDEPENDENT AIR DISTRIBUTORS OF PANAMA CITY, INC.

**Current Principal Place of Business:**

2615 CANAL AVE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

2615 CANAL AVE  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 16-1666717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GODWIN, LANNIS L JR  
2615 CANAL AVE  
PANAMA CITY, FL 32405

**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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: GODWIN, LANNIS L JR  
Address: 3178 JAMEY RD  
City-St-Zip: TALLAHASSEE, FL 32303

Title: DV ( ) Delete  
Name: GODWIN, LANNIS L SR  
Address: 1010 TALQUIN AVE  
City-St-Zip: QUINCY, FL 32351

Title: DT ( ) Delete  
Name: GODWIN, JANICE  
Address: 1010 TALQUIN AVE  
City-St-Zip: QUINCY, FL 32351

Title: DS ( ) Delete  
Name: GODWIN, DONNA W  
Address: 3178 JAMEY RD  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:** DONNA W. GODWIN

DS

01/16/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date