

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90323 001 ***150.00

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04162004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000055075 1. Entity Name WORLD AIRCRAFT CONNECTION, INC.					
Principal Place of Business 30617 US 19 N, STE 320 PALM HARBOR, FL 34684			Mailing Address 30617 US 19 N, STE 320 PALM HARBOR, FL 34684		
2. Principal Place of Business 1800 SW 18th AVE.		3. Mailing Address P.O. BOX 849			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State WILLISTON, FL		City & State WILLISTON, FL		4. FEI Number 55-0833358	
Zip 32696		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AGOADO, HARRY 30617 US 19 N, STE 320 PALM HARBOR, FL FL			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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00			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 AGOADO, HARRY 1450 COACHLIGHT WAY DUNEDIN, FL 34698	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NAYLOR, RICHARD P 565 FREDERICA LANE - BLDG. C DUNEDIN, FL 34698	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NAYLOR, RICHARD P. 1800 SW 18th AVE. WILLISTON, FL 32696	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	_____	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	_____	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	_____	☐ Change ☐ Addition			
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)(i), 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: <u>Richard P. Naylor</u> RICHARD P. NAYLOR PRESIDENT & D. 4/20/04 352-528-5719 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					