

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000056865

Entity Name: MR AIR OF FLORIDA, INC.

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6995 78TH AVE  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3268  
PINELLAS PARK, FL 33780

**New Mailing Address:**

P.O. BOX 3268  
PINELLAS PARK, FL 33780

FEI Number: 20-0389511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SCHLENTHER, JON E  
6995 78 AVE  
PINELLAS PARK, FL 33781 US

**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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHLENTHER, JON E  
Address: 6995 78 AVE  
City-St-Zip: PINELLAS PARK, FL 33781

Title: TD  
Name: SCHLENTHER, KIMBERLY  
Address: 6995 78 AVE  
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD  
Name: SCHLENTHER, SHIRLEY P  
Address: 34639 LAKE DRIVE  
City-St-Zip: PINELLAS PARK, FL 33781

Title: VD  
Name: SCHLENTHER, KARL E  
Address: 11356 94 ST  
City-St-Zip: LARGO, FL 33773

I hereby 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 all other like empowered.

SIGNATURE: JON E. SCHLENTHER

PD

04/30/2011

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

\_\_\_\_\_  
Date