## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # P04000019563

1. Entity Name

CHRÍS CUNNINGHAM AIRCRAFT MAINTENANCE, INC.



Principal Place of Business

495 CLIFTON RD

CRESCENT CITY, FL 32112

Mailing Address

495 CLIFTON RD

CRESCENT CITY, FL 32112

## FILED Mar 21, 2006 8:00 am Secretary of State

03-21-2006 90024 024 \*\*\*150.00



03162006

No Chg-P

CR2E034 (11/05)

4. FEI Number 32-0106048 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAENFLER, JAMES 20 N SUMMIT ST CRESCENT CITY, FL 32112

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Spinature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	:		<del>'</del>
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PST CUNNINGHAM, CHRISTOPHER A 459 CLIFTON RD CRESCENT CITY, FL 32112				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CTTY-ST-ZIP					
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 attact their statutes, with all other like empowered.					