


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90176 026 ***150.00

DOCUMENT # P04000061677	
1. Entity Name SOONER AVIATION, INC.	

Principal Place of Business 8517 FRENCH OAK DRIVE ORLANDO, FL 32835-2554	Mailing Address 8517 FRENCH OAK DRIVE ORLANDO, FL 32835-2554
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50047925

2. Principal Place of Business 11050 Coniston Way	3. Mailing Address 11050 Coniston Way
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Windermere FL	City & State Windermere FL
Zip 34786	Zip 34786
Country USA	Country USA



04262005 Chg-P CR2E034 (10/03)

4. FEI Number 20-1020537	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LONG, C.R.(BUDDY) 8517 FRENCH OAK DRIVE ORLANDO, FL 32835-2554	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 11050 Coniston Way City Windermere FL Zip Code 34786
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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: *[Signature]* **President** DATE: *05/04/2005*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSVT LONG, C.R. (BUDDY) 8517 FRENCH OAK DRIVE ORLANDO, FL 328352554 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11050 Coniston Way Windermere FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, C.R. (BUDDY) 8517 FRENCH OAK DRIVE ORLANDO, FL 328352554 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11050 Coniston Way Windermere FL 34786
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *[Signature]* **President** DATE: *05/04/2005* 407-876-8836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR