

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000144965

1. Entity Name

NATIONAL AVIATION, INC.



Principal Place of Business

14402 AIRPORT PARKWAY
CLEARWATER FL 33762
US

Mailing Address

14402 AIRPORT PARKWAY
CLEARWATER FL 33762
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 20-3762001

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

CLARK, RAY M JR
14402 AIRPORT PARKWAY
CLEARWATER FL 33762

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

Signature, 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, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME GAGLIANO, PAUL
STREET ADDRESS 12155 6TH ST. EAST
CITY-STATE-ZIP TREASURE IS. FL 33706

TITLE VP ☐ Delete
NAME BARNETT, THOMAS
STREET ADDRESS 11223 WHEELING DR
CITY-STATE-ZIP TAMPA FL 33625

TITLE TRES ☐ Delete
NAME CLARK, RAY M JR.
STREET ADDRESS 107 7TH ST.
CITY-STATE-ZIP BELLEAIR BEACH FL 33786

TITLE SEC ☐ Delete
NAME DURAVA, DENNIS A
STREET ADDRESS 1815 STETSON DR.
CITY-STATE-ZIP CLEARWATER FL 33765

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition
U00000736895
05/11/07-80006-009 150.00

☐ Change ☐ Addition

☐ Change ☒ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 attachment with an address with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/07