

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002300

Entity Name: KINGFISH PLANES INC

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

160 AVIATION DR N
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

3073 S HORSESHOE DR
STE 114
NAPLES, FL 34104 US

New Mailing Address:

3073 HORSESHOE DR S STE 112
NAPLES, FL 34104 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGNER, TIMOTHY L
3073 S HORSESHOE DR
STE 114
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

WAGNER, TIMOTHY L
3073 HORSESHOE DR S STE 112
NAPLES, FL 34104 US

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:

06/26/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAGNER, TIMOTHY L
Address: 3073 S HORSESHOE DR STE 114
City-St-Zip: NAPLES, FL 34104 US

Title: S () Delete
Name: WAGNER, TIMOTHY L
Address: 3073 S HORSESHOE DR STE 114
City-St-Zip: NAPLES, FL 34104 US

Title: T () Delete
Name: WAGNER, TIMOTHY L
Address: 3073 S HORSESHOE DR STE 114
City-St-Zip: NAPLES, FL 34104 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WAGNER, TIMOTHY L
Address: 3073 HORSESHOE DR S STE 112
City-St-Zip: NAPLES, FL 34104 US

Title: S (X) Change () Addition
Name: WAGNER, TIMOTHY L
Address: 3073 HORSESHOE DR S STE 112
City-St-Zip: NAPLES, FL 34104 US

Title: T (X) Change () Addition
Name: WAGNER, TIMOTHY L
Address: 3073 HORSESHOE DR S STE 112
City-St-Zip: NAPLES, FL 34104 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TIM WAGNER

P

06/26/2009

Electronic Signature of Signing Officer or Director

Date