

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P15121

1. Entity Name

M. G. AVIATION, INC.

FILED
Aug 25, 2000 8:00 am
Secretary of State

08-25-2000 90006 001 ***158.75

Principal Place of Business

RT. 168
P.O. BOX 767
ASHLAND KY 41105-0767

Mailing Address

RT. 168
P.O. BOX 767
ASHLAND KY 41105-0767

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

61-0941457

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRIFFITHS, MORRIS L.
6995 NOVA ROAD
ST. CLOUD FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
GRIFFITHS, MORRIS L
1931 GREEN SPRINGER RD
ASHLAND KY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
HALL, ELIZABETH
1915 WILSHIRE BLVD.
ASHLAND KY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Delete

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☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(606) 739-5139

CR2E034 (5/00)

Attachment DOCT# P15121
00081300

M.G. AVIATION, INC.
P.O. BOX 767
ASHLAND, KENTUCKY 41105-0767
PHONE (606) 739-5139

August 22, 2000

Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: First Notice of 2000 Uniform Business Report
Document # P15121

Please find enclosed a check in the amount of 158.75 for filing fees and the fee for a certificate of status.

We did not receive the first notice of uniform business report and we would appreciate your accepting this amount without the penalties due to our not receiving this notice.

If you have questions or need additional information, please feel free to give us a call.

Yours truly,



Morris L. Griffiths

MLG/dg