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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 31 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000004071 (6)

1. Corporation Name

STEEL HORSE HELICOPTERS, INC.

Principal Place of Business

12648 OVERSEAS HWY.
MARATHON FL 33050
US

Mailing Address

P.O. BOX 501920
MARATHON FL 33050
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/1992

3a. Date of Last Report

03/16/1994

4. FEI Number

65-0364079

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 7424 Coastal Dr

2a. Mailing Address

26 P O Box 9584

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Panama City FL

City & State

28 Panama City Bch, FL

Zip

24 32404

Country

25 US

Zip

29 32417

Country

30 US

9. Name and Address of Current Registered Agent

LOVETTE, DENNIS M
2146 OVERSEAS HIGHWAY
LOT 7
MARATHON FL 33050-1920

10. Name and Address of New Registered Agent

81 Name

PAUL Selby

82 Street Address (P.O. Box Number is Not Acceptable)

7424 Coastal Dr

83

84 City

PANAMA CITY

FL

85 Zip Code
32404

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

PAUL SELBY

Paul Selby

7-24-95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PS
NAME	LOVETTE, DENNIS M.
STREET ADDRESS	LOT 7, 2146 OVERSEAS HWY.
CITY - ST - ZIP	MARATHON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PS	☒ Change ☐ Addition
1.2 NAME	LOVETTE, DENNIS M.	
1.3 STREET ADDRESS	7424 Coastal Dr.	
1.4 CITY - ST - ZIP	Panama City, FL 32404	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

Dennis M. Lovette, Pres

April 1, 1995 (803) 689 6747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Typed Name