

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000056630 (5)

1. Corporation Name
AEROAGE, INC.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
SEP 14 PM 12:13

Principal Place of Business
8703 AIRPORT BLVD.
LEESBURG FL 34788
US

Mailing Address
8703 AIRPORT BLVD.
LEESBURG FL 34788
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/11/1993
3a. Date of Last Report 03/07/1994
4. FEI Number 59-3196265
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 Subd. Apt. #, etc.
22 City & State
23 Zip
24 Country
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26 Mailing Address
27 Subd. Apt. #, etc.
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent

PUCKETT, LEWIS A.
8703 AIRPORT BLVD.
LEESBURG FL 34788

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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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 199.03(3)(b), 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 in Black 12 or Black 13 if changed, or on an affidavit with an affidavit.

SIGNATURE: *Sandra B. Morham* Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

2-10-95
787-1345
Date Registered Agent