

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

APPROVED
AND
FILED

95 MAY - 1 AM 10:00
RECEIVED BY MAY 1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000026139 (3)

1. Corporation Name

FERNANDINA AVIATION, INC.

Principal Place of Business

12406 DRIFTSTONE
RIVERVIEW FL 33659

Mailing Address

12406 DRIFTSTONE
RIVERVIEW FL 33659

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/06/1994

3a. Date of Last Report

4. FBI Number

59-3241359

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

9. This corporation has liability for intangible tax under S. 192.002,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 1600 AIRPORT RD

2a. Mailing Address

26 1417 SADLER RD #129

Suite, Apt. #, etc.

22 FERNANDINA BEACH

Suite, Apt. #, etc.

27 FERNANDINA BEACH

City & State

23 FLORIDA NASSAU

City & State

28 FLORIDA

Zip

24 32034

Country

Zip

29 32034

Country

30 NASSAU

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES, INC.

1201 HAYS STREET

TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

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 (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 next to registered agent and one if applicable)

(Signature typed or printed next to registered agent and one if applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DPT
NAME	MORRIS, EDWARD G
STREET ADDRESS	12406 DRIFTSTONE
CITY, ST, ZIP	RIVERVIEW FL 33659
TITLE	DVS
NAME	WALLAN, SAAD
STREET ADDRESS	12406 DRIFTSTONE
CITY, ST, ZIP	RIVERVIEW FL 33659
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	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. 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)(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, 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward G. Morris

4-24-95 (904) 277-2110