FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
95 FEB 17 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000030112 (4)

1. Corporation Name
SKYTRUCK AIRCRAFT CORP.

Principal Place of Business	Mailing Address
233 EAST BAY ST. SUITE 1113 JACKSONVILLE FL 32202	233 EAST BAY ST. SUITE 1113 JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/20/1994
3a. Date of Last Report: N.A.

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

4. FEI Number: 593244360 ☐ 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

9. Name and Address of Current Registered Agent

FILINGS INC.
3732 N.W. 16TH ST.
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name: John H. Base
82 Street Address (P.O. Box Number is Not Acceptable): 3765 San Viscaya Dr.
83
84 City: Jacksonville FL 85 Zip Code: 32217

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: John H. Base Sec./Treas. — 2/8/95
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	President	☑ Change ☐ Addition
NAME	PENLAND, S P	1.2 NAME	S. P. Penland	
STREET ADDRESS	233 EAST BAY ST. #113	1.3 STREET ADDRESS	233 East Bay St. #1113	
CITY-ST-ZIP	JACKSONVILLE FL 32202	1.4 CITY-ST-ZIP	Jacksonville, Fl 32202	
TITLE		2.1 TITLE	V. P. Production	☐ Change ☑ Addition
NAME		2.2 NAME	Robert Tyer	
STREET ADDRESS		2.3 STREET ADDRESS	5983 County Rd. 352	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Keystone Heights, Fl 32656	
TITLE		3.1 TITLE	V. P. Marketing	☐ Change ☑ Addition
NAME		3.2 NAME	J. W. (Bill) Griggs	
STREET ADDRESS		3.3 STREET ADDRESS	P.O. Box 68007	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Franklin, Tenn 37038	
TITLE		4.1 TITLE	Sec./Treasurer	☐ Change ☑ Addition
NAME		4.2 NAME	John H. Base	
STREET ADDRESS		4.3 STREET ADDRESS	3765 San Viscaya Dr.	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Jacksonville, Fl. 32217	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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 119.07(3)(i), 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 (*) mark.

SIGNATURE: S P Penland — 2/14/95 — 904032100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0013400 CP