

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUN 29 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000038583 (8)

Corporation Name

GERTI'S PILOT SERVICE, INC.

Principal Place of Business

14 FOURTH ST
SARASOTA FL 34237

Mailing Address

2014 FOURTH ST
SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE

2 Date Incorporated or Qualified 05/23/1994	3 Date of Last Report
4 FEI Number 65-0492938	Applied For ☐ Not Applicable
5 Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6 ☐	\$5.00 May Be Added to Fees
7 This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

Principal Place of Business 3400 S. Tamiami Trail	2a. Mailing Address 3400 S. Tamiami Trail
Suite, Apt. #, etc. 301	Suite, Apt. #, etc. 301
City & State Sarasota, FL	City & State Sarasota, FL
Zip 34239	Zip 34239

8 Name and Address of Current Registered Agent JAENSCH, PETER J 2014 FOURTH ST SARASOTA FL 34237		10 Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable) 3400 S. Tamiami Trail	83 Suite	84 City Sarasota
		85 Zip Code FL 34239	

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.

NATURE

Peter J. Jaensch

06/23/95

OFFICERS AND DIRECTORS		13.	
1 NAME D RUTER, GERTRAUD	1.1 TITLE	☐ Change ☐ Addition	
1.2 STREET ADDRESS 15880 HANCOCK RD	1.2 NAME		
1.3 CITY - ST - ZIP SARASOTA FL 34240	1.3 STREET ADDRESS		
	1.4 CITY - ST - ZIP		
2 NAME	2.1 TITLE	☐ Change ☐ Addition	
2.2 STREET ADDRESS	2.2 NAME		
2.3 CITY - ST - ZIP	2.3 STREET ADDRESS		
	2.4 CITY - ST - ZIP		
3 NAME	3.1 TITLE	☐ Change ☐ Addition	
3.2 STREET ADDRESS	3.2 NAME		
3.3 CITY - ST - ZIP	3.3 STREET ADDRESS		
	3.4 CITY - ST - ZIP		
4 NAME	4.1 TITLE	☐ Change ☐ Addition	
4.2 STREET ADDRESS	4.2 NAME		
4.3 CITY - ST - ZIP	4.3 STREET ADDRESS		
	4.4 CITY - ST - ZIP		
5 NAME	5.1 TITLE	☐ Change ☐ Addition	
5.2 STREET ADDRESS	5.2 NAME		
5.3 CITY - ST - ZIP	5.3 STREET ADDRESS		
	5.4 CITY - ST - ZIP		
6 NAME	6.1 TITLE	☐ Change ☐ Addition	
6.2 STREET ADDRESS	6.2 NAME		
6.3 CITY - ST - ZIP	6.3 STREET ADDRESS		
	6.4 CITY - ST - ZIP		

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-07/05/95-181030-023
*******225.00 *****225.00**

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)(k), 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:

Peter J. Jaensch
Signature and Typed or Printed Name of Signing Officer or Director

Date

Signature Printed

6-22-95 813 366-9841