SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 5/1/95: $275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $275)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL -3 AM 8:39

DOCUMENT # **P94000049058 (8)**

1. Corporation Name

PELICAN SEAPLANES INC.

Principal Place of Business	Mailing Address
1902 RIVER MEADOW COURT VALRICO FL 33594	1902 RIVER MEADOW COURT VALRICO FL 33594

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3503 Pine knot DR	2a. Mailing Address 26 3503 Pine knot DR
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 VALRICO FL	City & State 28 VALRICO FL.
Zip / County 24 33594 / 25 USA	Zip / County 29 33594 / 30 USA

3. Date Incorporated or Qualified: 06/30/1994
3a. Date of Last Report: N/A
4. FEI Number: 59-3258411 — ☐ 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
7. The corporation has subsidy for interstate tax under s. 199.032 Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS ST. 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 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 of new registered agent, if applicable) (Signature of current registered agent required) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (FL)	
TITLE	D	1.1 TITLE	D ☒ Change ☐ Addition
NAME	GAMBONE, JOSEPH W	1.2 NAME	GAMBONE, JOSEPH W
STREET ADDRESS	1902 RIVER MEADOW COURT	1.3 STREET ADDRESS	3503 Pine knot DR.
CITY ST ZIP	VALRICO FL 33594	1.4 CITY ST ZIP	VALRICO, FL. 33594
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	HALLETT, JACKSON B	2.2 NAME	HALLETT JACKSON B
STREET ADDRESS	1902 RIVER MEADOW COURT	2.3 STREET ADDRESS	3503 Pine knot DR
CITY ST ZIP	VALRICO FL 33594	2.4 CITY ST ZIP	VALRICO, FL. 33594
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
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 address.

SIGNATURE: [signature] 6-26-95 813-662-9006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Telephone Number)

0184053 FP