

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000050492 (5)**

1. Corporation Name
AIRLINE MOVING AND STORAGE, INC.

Principal Place of Business

**106 STOCKTON STREET
JACKSONVILLE FL 32204
US**

Mailing Address

**106 STOCKTON STREET
JACKSONVILLE FL 32204
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/05/1994

4. FEI Number

59-3314588

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 owes or has paid the current year Intangible
Personal Property Tax due June 30 ☒ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. Zip Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

**KNIGHT, HOWARD L
106 STOCKTON STREET
JACKSONVILLE FL 32205**

10. Name and Address of New Registered Agent

81. Name **ENGELS, DONALD R.**

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

106 STOCKTON STREET

83.

84. City

JACKSONVILLE

FL

85. Zip Code

32204

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

Donald R. Engels

(NOTE: Registered Agent signature required when reinstating)

2-2-98

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **KNIGHT, HOWARD L**
STREET ADDRESS **106 STOCKTON STREET**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **VPD** ☒ DELETE

NAME **ENGELS, DONALD**
STREET ADDRESS **106 STOCKTON STREET**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **VST** ☐ DELETE

NAME **TAYLOR, SUSAN L**
STREET ADDRESS **106 STOCKTON ST**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT** ☒ Change ☐ Addition

1.2 NAME **DONALD R. ENGELS**
1.3 STREET ADDRESS **106 STOCKTON STREET**
1.4 CITY-ST-ZIP **JACKSONVILLE, FL. 32204**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 incorporator 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:

DONALD R. ENGELS

1-21-98

(904)353-3185

CR2E034 (10/97)