

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000084694 (6)**

1. Corporation Name  
**AVIATION DATA SYSTEMS INCORPORATED**



Principal Place of Business: **478 BALLARD DR., STE. 5 MELBOURNE FL 32935**  
Mailing Address: **478 BALLARD DR., STE. 5 MELBOURNE FL 32935**

3. Date Incorporated or Qualified: **11/21/1994**  
3a. Date of Last Report: **03/06/1995**  
4. FEI Number: **39-1800771**  
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. 193.032, Florida Statutes:  Yes  No

2. Principal Place of Business  
21 **478 BALLARD DRIVE**  
Suite, Apt. #, etc.: **# 34**  
City & State: **Melbourne**  
Zip: **32935** Country: **USA**  
2a. Mailing Address  
26 **478 BALLARD Drive**  
Suite, Apt. #, etc.: **# 34**  
City & State: **Melbourne**  
Zip: **32935** Country: **USA**

9. Name and Address of Current Registered Agent  
**MCKINNON, DONALD L  
478 BALLARD DR., STE. 5  
MELBOURNE FL 32935**

10. Name and Address of New Registered Agent  
81 Name: **Keith M Sandberg**  
82 Street Address (P.O. Box Number is Not Acceptable): **478 BALLARD DRIVE**  
83: **#34**  
84 City: **Melbourne** FL 85 Zip Code: **32935**

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 officer 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: *Keith M. Sandberg* (Typed Name: **Keith M. Sandberg**)  
Date: **Apr 15, 1996**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>D</b>	<b>MCKINNON, DONALD L</b>	1.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	<b>478 BALLARD DR., STE. 5</b>	1.2 NAME:	
STREET ADDRESS:	<b>MELBOURNE FL 32935</b>	1.3 STREET ADDRESS:	
CITY-ST-ZIP:		1.4 CITY-ST-ZIP:	
TITLE: <b>D</b>	<b>DICKEY, JOYCE</b>	2.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	<b>4332 GILLIAT ST.</b>	2.2 NAME:	
STREET ADDRESS:	<b>DULUTH MN 55804</b>	2.3 STREET ADDRESS:	
CITY-ST-ZIP:		2.4 CITY-ST-ZIP:	
TITLE: <b>D</b>	<b>SANDBERG, KEITH</b>	3.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	<b>301 SECO D ST.</b>	3.2 NAME:	
STREET ADDRESS:	<b>NASHWAUK MN 55769</b>	3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE: <b>D</b>	<b>KOSKELA, WYATT</b>	4.1 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	<b>1225 N. WICKRD., #413</b>	4.2 NAME:	
STREET ADDRESS:	<b>MELBOURNE FL 32935</b>	4.3 STREET ADDRESS:	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	
TITLE:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	
TITLE:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		6.4 CITY-ST-ZIP:	

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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)(c), 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: *Joyce Dickey* (Typed Name: **Joyce Dickey**)  
Date: **4/29/96** Phone: **407-253-6283**

CR2E034 (12/95)