

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000085436

1. Entity Name

NEWCO AVIATION SERVICES, INC.

**FILED**  
**Feb 29, 2000 8:00 am**  
**Secretary of State**

02-29-2000 90105 016 \*\*\*150.00

Principal Place of Business

1105 TAYLOR ROAD, UNIT L  
PUNTA GORDA FL 33950

Mailing Address

1105 TAYLOR ROAD, UNIT L  
PUNTA GORDA FL 33950-6053

2. Principal Place of Business

1105 Taylor Street

Suite, Apt. #, etc.

Unit L

3. Mailing Address

1105 Taylor Street

Suite, Apt. #, etc.

Unit L

City & State

Punta Gorda, FL

City & State

Punta Gorda, FL

Zip

33950

Country

USA

Zip

33950

Country

USA

4. FEI Number

65-0536707

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WIDMEYER, STEPHAN B  
3871A TAMiami TRAIL  
PORT CHARLOTTE FL 33952

Name  
Theresa B. Mannix

Street Address (P.O. Box Number is Not Acceptable)  
1105 Taylor Street

Unit L

City  
Punta Gorda

FL

Zip Code  
33950

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Theresa B. Mannix, Vice President *Theresa B. Mannix* 2-08-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME PS  
STREET ADDRESS MANNIX, PATRICK H  
CITY-ST-ZIP 3518 TERIN COURT  
PUNTA GORDA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME VT  
STREET ADDRESS MANNIX, THERESA B  
CITY-ST-ZIP 3518 TERIN CT  
PUNTA GORDA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Theresa B. Mannix*

Theresa B. Mannix, Vice President

2-08-00 (941) 639-8081

Date

Daytime Phone #

CR2E034 (9/99)