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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000026088 (1)

GULF COAST AIR, INC.

STREET ADDRESS CITY+ST-ZIP

SIGNATURE:

Principal Plac	e of Business	Mailing Address	Mailing Address 2180 SPARROW CT. SARASOTA FL 34239-3755			- 1 IODLINGU INU ININEI DAIM ONUU ONUU ONUU	i Odiji sirte didil de	HOL IBIOL JOH IDA	ji
2180 SPARROV SARASOTA FL	V CT.	2180 SPARROW CT.							
						3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1995 03/01/1966			
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For			For
21		26	26			65-0573686 Not Appl			licable
Suite, Apt	# etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	le	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			3e
23		28				Trust Fund Contribution		Added to Fees	s
Zip			Country			8. This corporation has liability for intengible tax under s. 199.032,			
24	25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent				
		rent Registered Agent		81 1	Name	10. Name and Address of New Re	giatered Agent	<u> </u>	
HERB, STEVEN 2070 RINGLING BLVD. SARASOTA FL 34237						Address (P.O. Box Number is Not Acceptable)			
				3					
				84 (City		FL 85	Zip Code	
				Щ.		poration submits this statement for the p		<u> </u>	 -
SIGNATURE	Signative synchlor punted name of registered			d Agent s	signature requi	rad when reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS DELETE	13.		16	ADDITIONS/CHANGES TO OFFIC			Addition
TIPLE NAME	SPENCER, D.M.		1.1 TI 12 N		1	70	ų v	ilediåe ⊏1.e	*Outroi
	2180 SPARROW CT		,		Duter				
STREET ADDRESS	SARASOTA FL 34239		1	TREET AD	1				
CITY+ST-ZIP TITLE	D	DELETE	211	ITY-ST-7		1D	N C	hange	Addition
NAME	SPENCER, DONNA	had becare		2.2 NAME		טן	- 144	mango E. I	100/110/
STREET ADDRESS	2180 SPARROW CT			TREET AD	DRESS				
CITY-ST-7IP	SARASOTA FL 34239			CITY-SI-					
TITLE		DELETE	3.1 7					Change X A	Addition
NAME			3.2 N		Si	sencer, Mark			
STREET ADDRESS			3.3 S	TREET AD	ORESS A	pencer, Mark 180 Sparrow Ct			
CITY-S1-ZIP	1		1	CITY-SI-	ZIP S	arasota, Fl 34139			
TITLE		DELETE	4.1 T					Change 🔲 /	Addition
NAME			4.21	NAME					
STREET ADDRESS			4.3 S	TREET AD	DRESS				
CITY ST ZIF			4.4.0	ITY-ST-	ZIP				
TITLE		DELETE	5.1 T	ITLE				Change /	Addition
NAME			5.2 N	IAME	Į				
STREET ADDRESS			5.3 S	TREET AC	ORESS				
CITY-ST-ZIP			5.40	HTY-ST-	ZIP				
TITLE		DELETE	6.1 T	ITLE			(Change 🔲 /	Addition
NAME			6.2 N	AME					

6.3 STREET AODRESS

E4CITY-\$1-ZIP

14. I do 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 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.