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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000051998 (9)

## FRANK DEVIN AVIATION SERVICES, INC.

Principal Placi	e of Business	Mailing	Address							
1619 DESOTO SARASOTA FL US	ROAD	1619 DE	1619 DESOTO ROAD SARASOTA FL 34234-3063							
							3. Date Incorporated or Qua 06/29/1995		ate of Last F 30/1996	leport
	Place of Business	}a	ing Address	******			4. FEI Number 65-0583003		<b>→</b>	pplied For
Suite, Apt.	#. els	26 Suite	e, Apt. #, etc.	<del> </del>						ot Applicable Additional
22		27					5. Certificate of Status Desire	ed 🔲		equired
City & Srate		City	City & State				8. Election Campaign Finance		\$5.00	May Be
23		28		T	- 1		Trust Fund Contribution			to Fees
7ip	Country 25	Z (2)	¬		Country		This corporation has liabilified Statutes	ity for intangible Yes		. 199.032,
24	9. Name and Address of Curre		Agent	[30]			10. Name and Address of N			
LAUI	BER, FRANK D				81	Name		<del></del>		
1619 DESOTO ROAD			ŀ	82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
SAR	ASOTA FL 34234									
					83					
					84	City		FL	<b>85</b> Zip	Code
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat an familiar with land accept the oblig	e of Florida Si	uch change was	authorized	yd b	the corporation	oration submits this statement for on's board of directors. I hereby	r the nurnose o	f changing i	ts registered registered
SIGNATURE	****									****
12.	Signature typed or profed name of registered at OFFICERS Aft			1E: Registered	1 Age	nt signature require	d when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	S IN 12
TITLE	PT	ID DITE OTO	DELETE	1.1 TC	TLE		ADDITIONS/OFFAIGLE TO	OI TIOLITO 7441	Change	Addition
NAME	LAUBER, FRANK D			1.2 NA	ME					
STREET ADORESS	1619 DESOTO ROAD			1.3 ST	REET	ADDRESS				
CHY-SI-ZIP	SARASOTA FL		٠	1.4 Ci	TY-\$1	r-zip	······································			
TITLE	VS		DELETE	2 1 TI	TLE				Change	☐ Addition
NAME	LAUBER, HERBERT		•	2.2 NA						
STREET ADDRESS	1619 DESOTO ROAD SARASOTA FL					ADDRESS				
CHY-SI-ZIP TITLE	ONIMOUNTE		DELETE	2. 4 C 3.1 Ti		1-2117			Change	Addition
NAMÉ				3.2 N/			,			
STREET ADDRESS				3.3 \$1	REET	ADDRESS				
C 1Y+S1+ZIP				3.4. C	ITY-S	T-21P				
TITLE			DELETE	4.1 11					Change	Addition
NAME				4.2 N						
STREET ADDRESS						ADDRESS				
CHY-S1-ZIP			DELETE	4.4 CI		-ZIP			Change	Addition
TIT: F NAME			- DETELE	51 TI 52 N		1			LI CHARGE	L_J ADDITION
STREET ADORESS				1		ADDRESS				
CHY-S1-ZIP				5.4 CI						
THE			DELETE	61 Ti					Change	☐ Add tion
NAME				62 NJ	AME				="	

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 arrural report or supplemental angular 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

STREET ADDRESS

SIGNATURE:

1/10/97

**FILED** 

Mar 11 1997 8:00am

Secretary of State