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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

1996

DOCUMENT # P95000097432 (5)

JORDAN & SON AIR REPAIR, INC.									* ***********************************	AL <b>aana (a</b> nn 4 <b>a</b> an 7		
Principal Place of Business 1516 E 11TH ST PANAMA CITY FL 32401				Mailing Address 1516 E 11TH ST PANAMA CITY FL 32401								
	_								3. Date Incorporated or Qualified 12/20/1995	3a. Date of La	st Report	
2. Principal Place of Business				28. Mailing Address					4. FEI Number 59 - 335552	,	Applied For	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					37 99993 A		Not Applicable	
22				27					5. Certificate of Status Desired	1 1	.75 Additional ee Required	
City & State				City & State					6. Election Campaign Financing		5.00 May Be	
Zip Country			2	Zip Country				Trust Fund Contribution		dded to Fees		
24	25		2	29 30		odd i it y			8. This corporation has liability for intangible tax under s 199.032, Fiorida Statutes Yes No			
	9. Name	and Address of (	Current Re	gistered Agent					10. Name and Address of New Re	gistered Ageni	·	
						81	Name	1				
	, KENNETI	ł A JR				82	Street	Address	s (P.O. Box Number is Not Acceptable	)		
1518 E 11TH ST PANAMA CITY FL 32401												
Lysiarama	OIII FE C	52 <del>4</del> 0 I				83						
i i						84	City			E1 85	Zip Code	
O TOGRAGE	ou augoni, or	DOM: IT UTC STATE L	JI I IUMULI. CI	607.1508, Florida St uch change was autr 07.0505, Florida Stal	COUNTY OF THE	bove-n e corpo	amed coration's	orporations board	on submits this statement for the purp of directors. Thereby accept the appor	ose of changing nament as regist	its registered office ered agent. I am	
SIGNATURE												
12.	Signature, typed	or printed name of register	ed agent and tid RS AND DIF		(NOTE: Register		signatino			DA"E	******	
TITLE	T	OFFICE	NO PARIS LAP	DELETE		1 TITLE		VR480	-TADDITIONS/CHANGES TO OFFIC PUETA A JUROBN JR	ERS AND DIREC		
NAME				<b></b>		NAME		سحيها	I WAILCRAFT AVE		ide Manifoli	
STREET ADDRESS							ADDRESS	Your	NESTERN PLORIDA 3246	6		
CITY+ST-ZIP					1.4	CITY-S1	- 71º	ľ				
TITLE				DELETE		2 : THLE			LETARY / TREASURER	[] Char	nge 💢 Addition	
NAME OTRIES LEGISLA						NAME			Ners D JORDAN		, .	
STREET ADDRESS							ADDRESS	850	6 WAIICRAFT AVE Ugstra FLORIDA 32466			
CITY-ST-ZIP TITLE		***************************************		[] DELETE		CITY-ST	- ZiP	your	95,774 7700.177 32400	[ ] Char	nge [] Addition	
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STREET ADDRESS							ADDRESS					
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STREET ADDRESS						STREET			00000183 -05/23/960101	8042		
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NAME				L.J. F. T. S.		NAME				[_] Gia-	ige [_] Natitibili	
STREET ADDRESS						STREET	ADDRESS					
CITY+ST-ZIP					5.4	CITY-ST	- ZIP					
TITLE				[] DELETE	6. 1	TITLE		ļ		Char	nge 🔲 Addition	
NAME						NAME						
STREET ADDRESS					1	STREE1 #						
CITY-ST-ZIP 14. I do hereb	y certify that	the information sun	plied with th	iis fitna is voluntariiv	furnished and	CITY-ST	not ou	alify for t	he exemption stated in Section 119.07	131M Florido Ci	atitos 15 des	
oath; that	l am an offic	er or director of the	s annual rep corporation		annuai repon ustee empow				rie exemption stated in Section 119.07 and that my signature shall have the sa eport as required by Chapter 607, Flori			
SIGNAT	URE:	SIGNATURE AND TY	PED OR PRIM	ED NAME OF SIGNING OF	C COSCO	CTOR	Ppn	(Oen)	7. 4.21.96 Dato	Daytime Ff	C10 #	