

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

FILED

**Apr 30 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P96000027590 (4)
1. Corporation Name
AIR UNLIMITED, INC.



Principal Place of Business: **2445 DUNN AVENUE APARTMENT #516 JACKSONVILLE FL 32218**
Mailing Address: **2445 DUNN AVENUE APARTMENT #516 JACKSONVILLE FL 32218**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/22/1996**

4. FEI Number: **59-3384021** Applied For: Not Applicable:

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21 **1606 Airport Road** 26 **1417 Sadler Road**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **# 277**

23 **Fernandina Beach, FL** 28 **Fernandina Beach, FL**
City & State City & State
24 **32034** 25 **USA** 29 **32034** 30 **USA**
Zip Country Zip Country

9. Name and Address of Current Registered Agent
**WHORTON, J. PATRICK
2445 DUNN AVENUE
APARTMENT #516
JACKSONVILLE FL 32218**

10. Name and Address of New Registered Agent

81 Name: **J. Patrick Whorton**
82 Street Address (P.O. Box Number is Not Acceptable): **3183 Owens Road**
83
84 City: **Fernandina Beach** FL 85 Zip Code: **32034**

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 office 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: *J. Patrick Whorton* **J. Patrick Whorton president** DATE: **04-21-98**

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	WHORTON, J. PATRICK	
STREET ADDRESS	2445 DUNN AVENUE, APARTMENT #516	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	J. Patrick Whorton	
1.3 STREET ADDRESS	3183 Owens Road	
1.4 CITY-ST-ZIP	Fernandina Beach FL 32034	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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: *J. Patrick Whorton* DATE: **04-21-98**

CR2E034 (10/97)