

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000068244

Entity Name: KIWI CHARTERS, INC.

FILED
Jun 29, 2005
Secretary of State

Current Principal Place of Business:

1333 LONG STREET
ORLANDO, FL 32855

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 555146
ORLANDO, FL 32855

New Mailing Address:

FEI Number: 59-3396576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACLAINE, TREVOR J
1333 LONG STREET
ORLANDO, FL 32855 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: IRELAND, DAVID
Address: P O BOX 98
City-St-Zip: KILLERNAY, FL 34740

Title: VP () Delete
Name: MACCAINE, TREVOR
Address: 3812 BIBB LANE
City-St-Zip: ORLANDO, FL 32817

Title: VP () Delete
Name: GLOSSER, FRANK
Address: 7421 WEST RIDGE CT
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MACLAINE, TREVOR
Address: 3812 BIBB LANE
City-St-Zip: ORLANDO, FL 32817

Title: VP (X) Change () Addition
Name: CLOSSER, FRANK
Address: 7421 WEST RIDGE CT
City-St-Zip: ORLANDO, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TREVOR J. MACLAINE

P

06/29/2005

Electronic Signature of Signing Officer or Director

_____ Date