2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000099937

Title:

Name:

Address:

City-St-Zip:

FILED Jan 23, 2009 Secretary of State

Entity Nar	me: FLAMING	O AIR OF FLORIDA KEYS, IN	C.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	ERSEAS HIGH ADA, FL 33036						
Current Mailing Address:			New Mailing Address:				
P O BOX 8 LONG KE	348 Y, FL 33001						
FEI Number: 65-0713141 FEI Number Applied For ()		FEI Number Not App	FEI Number Not Applicable ()		Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
6068 Ć DL	REGORY R JRHAM DR RTH, FL 3346	7 US					
The above in the State	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing i	ts registered o	ffice or registered ag	ent, or both,	
SIGNATUR	RE:						
	Electron	ic Signature of Registered Age	ent		Date		
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS	S AND DIREC	rors:	ADDITION	IS/CHANGES	TO OFFICERS AND	DIRECTORS	
Title: Name: Address: City-St-Zip:	P () BOND, RICK BOX 961 LONG KEY, FL	Delete	Title: Name: Address: City-St-Zip:	PRES (X) RECKWERDT, PO BOX 86 ISLAMORADA,			
Title: Name: Address: City-St-Zip:	VP () BOND, CHRIST 107 SNAPPER (LONG KEY, FL	CREEK DR	Title: Name: Address: City-St-Zip:	VP (X) RECKWERDT, PO BOX 86 ISLAMORADA,			
Title: Name: Address: City-St-Zip:	SEC () BOND, MARY J 18105 SAILFISH LUTZ, FL 3355		Title: Name: Address: Citv-St-Zip:	SEC (X) RECKWERDT, PO BOX 86 ISLAMORADA.			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

TRES

PO BOX 86

RECKWERDT, ANNE

ISLAMORADA, FL 33036

() Change (X) Addition

SIGNATURE: MICHEAL RECKWERDT **PRES** 01/23/2009

() Delete