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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000016995

1. Corporation Name

2145 E. MAIN STREET

LEESBURG FL 34748

CENTURY AIRCRAFT MANAGEMENT & SALES, INC.

ţ		. : .	1:	Wy.
	- 29			

Principal Place of Business

Mailing Address

2145 E. MAIN STREET LEESBURG FL 34748

## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90209 050 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed				
					02/21/1997				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	Applied For		
21		26			59-3436028	l N	lot Applicable		
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75	Additional		
22	A view of the control of	27			5. Certifcate of Status Desired	Fee R	Required		
City & State	e	City & State			6. Election Campaign Financing		May Be to Fees		
23		28			Trust Fund Contribution		to rees		
Zip	Country	Zip _	_ Country ¬	,	8. This corporation owes the current year Intar	<u> </u>	MaNo		
24	25	29 30	<u> </u>		1 Grobitar Toporty Tara	∐ Yes	LACINO		
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Registered A	yem			
'. L/L CT	OLL PRANK L ID	•	01	Name					
	CH, FRANK J JR		82	82 Street Address (P.O. Box Number is Not Acceptable)					
	5 E. MAIN STREET			Ĺ	·				
LEESBURG FL 34748					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
CHAR	CONTROLL SPRINGERS	17 21 ATT 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	84	City	4.7.0 <b>E</b> I	85 Zip	Code		
			the shore	n named com	oration submits this statement for the purpose of c	hanging it	s registered		
office or r	agistared agent or both in the State of	i Florida. Such change was auth	ionzed by	r the corporatio	on's board of directors. I hereby accept the appoint	ment as r	egistered		
agent. I a	m familiar with, and accept the obligation	ops of Station 607,0505, Florid	a Statutes	5.	امر الله المعارض المعارض المراجع المعارض	- =			
SIGNATURE	78.05					, <u> </u>			
	Signature apped or printed name of registered agent			ent signature require	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	OPS IN 12		
12.	OFFICERS AND		13.	<del></del>	ADDITIONS/CHANGES TO CITICENS AND	Change			
TITLE	D	☐ DELETE	1.1 TITLE		•	Change			
NAME	KUTCH, FRANK J		1.2 NAME						
STREET ADDRESS	2145 E. MAIN STREET		1.3 STREE	T ADDRESS					
CITY-ST-ZIP	LEESBURG FL 34748		1.4 CITY-5	ST-ZIP			- Addition		
TITLE		☐ DELETE	2.1 TITLE			Change	Addition		
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	TADDRESS					
CITY-ST-ZIP			2. 4 CITY+	ST-ZIP		<del></del>	. • <u> </u>		
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition		
NAME			3.2 NAME	1					
STREET ADDRESS			3.3 STREE	TADDRESS					
CITY-ST-ZIP			3.4. CITY-						
TITLE		☐ DELETE	4.1 TITLE			Change	e 🗌 Addition		
NAME			4. 2 NAME	.		•			
STREET ADDRESS			1	T ADDRESS					
CITY-ST-ZIP			4.4 CITY-5						
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NAME	ł		5.2 NAME	I	•				
			5.3 STREE	ET ADDRESS					
STREET ADDRESS			5.4 CITY-	· · · · ·					
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			Change	e Addition		
TITLE		□ DELETE	6.2 NAME						
NAME									
STREET ADDRESS		•		ET ADDRESS					
CITY, ST. 7IP			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, with all other like empowered.

SIGNATURE:

Daytime Phone #