

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000042750

Entity Name: ISLAND AVIATION, INC.

FILED  
Apr 29, 2005  
Secretary of State

**Current Principal Place of Business:**

1600 AIRPORT ROAD  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

602 AIRPORT ROAD  
FERNANDINA BEACH, FL 32034

**Current Mailing Address:**

P O BOX 6403  
FERNANDINA BEACH, FL 32035 US

**New Mailing Address:**

FEI Number: 59-3448006      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SEABERT, SALLY A  
1641 OCEAN FOREST DRIVE  
FERNANDINA BEACH, FL 32034 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SEABERT, GARY E  
Address: 1600 AIRPORT ROAD  
City-St-Zip: FERNANDINA BEACH, FL 32034

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SEABERT, GARY E  
Address: 602 AIRPORT ROAD  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: GARY E. SEABERT

PD

04/29/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date