

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000046848

1. Entity Name

HEYWOOD HELICOPTERS, INC.

FILED

Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90049 028 ***150.00

Principal Place of Business

Mailing Address

165 MORNINGSID DRIVE
LAKELAND FL 33803

165 MORNINGSID DRIVE
LAKELAND FL 33803-2637

2. Principal Place of Business

~~8850~~ 3003 S Florida Ave

3. Mailing Address

3003 S Florida Ave

Suite, Apt. #, etc.

Suite 201

City & State

LAKELAND, FL

Suite, Apt. #, etc.

Suite 201

City & State

LAKELAND, FL

Zip

33802

Country

FL

Zip

33803

Country

FL

6. Name and Address of Current Registered Agent

PHILLIPS, R. PATRICK ESQ.
200 NORTH THORNTON AVE.
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
RICHARDS, H.M.
165 MORNINGSID DRIVE
LAKELAND FL 33803 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP - President
BELCHER, JAMES M
4313 FOREST HILLS DRIVE
LAKELAND FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
MADDOX, STEVEN F
P.O. BOX 7100
LAKELAND FL 33807 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V-P
JAMES M
5925 Empress Hwy
Maitland, FL 32860 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Belcher, James
Sama ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V-P
John McElvey
5925 Empress Hwy
Maitland, FL 32860 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/00 863-687-8227