

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000047838

1. Entity Name
GULF COAST ROTORCRAFT, INC.

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90335 032 ***150.00

Principal Place of Business
**4931 STAR AVENUE
PANAMA CITY FL 32404**

Mailing Address
**4931 STAR AVENUE
PANAMA CITY FL 32404**

2. Principal Place of Business
5814 Merritt Brown Road

3. Mailing Address
5814 Merritt Brown Road

City & State
PANAMA City, FL

City & State
PANAMA City FL

4. FEI Number **59-3450340**

Applied For
Not Applicable

Zip
32404

Country
USA

Zip
32404

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HAYNES, ROBERT A JR
4931 STAR AVENUE
PANAMA CITY FL 32404**

7. Name and Address of New Registered Agent

Name **HAYNES, Robert A. Jr**
Street Address (P.O. Box Number is Not Acceptable)
5814 Merritt Brown Road
City **PANAMA City** **FL** Zip Code **32404**

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 *Robert A. Haynes* *President* *4/20/01*
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, 2001 Fee will be \$550.00.
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **HAYNES, ROBERT A JR**
STREET ADDRESS **5721 FRANK HOUGH RD**
CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE **ST** ☐ Delete
NAME **HAYNES, SUSAN I**
STREET ADDRESS **5721 FRANK HOUGH RD**
CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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: *Robert A. Haynes* *4/20/01* *850 769-4926*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0029521

CR2E034 (10/00)