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Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90095 043 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000076677

1. Corporation Name
J.T. AVIATION, INC.

Principal Place of Business
3115 S. MILLER RD.
VALRICO FL 33594

Mailing Address
3115 S. MILLER RD.
VALRICO FL 33594



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/28/1997

4. FEI Number

59-3326753

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 902 Guisando De Avila

Suite, Apt. #, etc.

22

City & State

23 Tampa FL

Zip

24 33613

Country

25 USA

2a. Mailing Address

26 902 Guisando De Avila

Suite, Apt. #, etc.

27

City & State

28 Tampa FL

Zip

29 33613

Country

30 USA

9. Name and Address of Current Registered Agent

WOODSIDE, JAMES S III
3115 MILLER RD
VALRICO FL 33594

10. Name and Address of New Registered Agent

81 Name

James J. Woodside III

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

902 Guisando De Avila

83

84 City

Tampa

FL

85 Zip Code

33613

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME WOODSIDE, JAMES J III

STREET ADDRESS 3115 S. MILLER RD.

CITY-ST-ZIP VALRICO FL 33594

TITLE D ☐ DELETE

NAME WOODSIDE, THERESA A

STREET ADDRESS 3115 S. MILLER RD.

CITY-ST-ZIP VALRICO FL 33594

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME James J. Woodside III

1.3 STREET ADDRESS 902 Guisando De Avila

1.4 CITY-ST-ZIP Tampa, FL 33613

2.1 TITLE D ☐ Change ☐ Addition

2.2 NAME THERESA WOODSIDE

2.3 STREET ADDRESS 902 Guisando De Avila

2.4 CITY-ST-ZIP Tampa, FL 33613

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

James J. Woodside III 1/7/99 813 2659652

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0378919