

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000077223

1. Entity Name

V K AIRCRAFT, INC.

**FILED**  
**Apr 23, 2000 8:00 am**  
**Secretary of State**

04-23-2000 90033 020 \*\*\*150.00

Principal Place of Business

Mailing Address

BLUE HANGAR, GATE 5  
ALBERT WHITTED AIRPORT  
ST. PETERSBURG FL 33701

BLUE HANGAR, GATE 5  
ALBERT WHITTED AIRPORT  
ST. PETERSBURG FL 33701

2. Principal Place of Business

ALBERT WHITTED AIRPORT

3. Mailing Address

ALBERT WHITTED AIRPORT

Suite, Apt. #, etc.

BLUE HANGAR, GATE 4

Suite, Apt. #, etc.

BLUE HANGAR, GATE 4

City & State

ST. PETERSBURG, FL

City & State

ST. PETERSBURG, FL

Zip

Country

33701

Zip

Country

33701



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3536162

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PHILLIPS, R. PATRICK  
200 NORTH THORNTON AVENUE  
ORLANDO FL 32801

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D.	<input type="checkbox"/> Delete
NAME	VAN KESTERN, HENRY	
STREET ADDRESS	BLUE HANGAR, GATE 5, ALBERT WHITTED AIRPT.	
CITY-ST-ZIP	ST. PETERSBURG FL 33701	
TITLE	S	<input type="checkbox"/> Delete
NAME	DAY, DOUGLAS K.	
STREET ADDRESS	VK Leasing, Inc. ↓	
CITY-ST-ZIP	Albert Whitted Airport	
TITLE		<input type="checkbox"/> Delete
NAME	Blue Hangar, Gate 4	
STREET ADDRESS	St. Petersburg, FL 33701	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAN KESTEREN, HENRY	
STREET ADDRESS	WHITTED AIRPORT, BLUE HANGAR, GATE 4	
CITY-ST-ZIP	ST. PETERSBURG, FL 33701	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-00

Date

727 8981921

Daytime Phone #

CR2E034 (9/99)