2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2004 8:00 am Secretary of State DOCUMENT # P98000079123 1. Entity Name 04-28-2004 90231 032 ***150.00 AIR HOLIDAY FLYING CLUB, INC. Principal Place of Business Mailing Address 1218 SHOREWOOD DRIVE 1218 SHOREWOOD DRIVE ORLANDO, FL 32806-2350 US ORLANDO, FL 32806-2350 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242004 Cha-P CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 59-3538088 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PHILLIPS, R. PATRICK Street Address (P.O. Box Number is Not Acceptable) 200 N THORNTON AVE ORLANDO, FL 32801 City 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. I am familiar with, and accept SIGNATURE name of registered agent and title if applica-(NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE Change Addition COLES ROBERT HI 1734 ROSE GARDEN LANE NAME COLES, ROBERT H NAME 1734 ROSE GARDEN LANE REET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32825 CITY-ST-7/P ORLANDO, FL 32825 TITLE ☐ Delete TITLE ☐ Change Addition BERELSMAN, DAVIN LAMBIASO, MARLENE K NAME 238 ACADIA TERRACE STREET ADDRESS 1734 SENECA BLVD STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS, FL 32708 CITY+ST-ZIP CeleBration, FL 34747 TITLE Delete TITLE Addition ☐ Change WYCKOFF, DANIEL M NAME GUILL KENNETH 3111 LAKE MARGARET DR. STREET ADDRESS 309 ROBIN HILL DR STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 CITY-ST-7IP Galando, FL 32806 SIT MERRILL, WOODROW T. TITLE Delete TITLE Addition ☐ Change NAME BLACK, WILLIAM H NAME 1218 Shonzuscal Dr. STREET ADDRESS 1615 ALGONQUIN TR STREET ADDRESS CITY-ST-ZIP MAITLAND, FL 32751 CITY-ST-7P 0e LAW 60. FC 32806-2350 THE ☐ Delete TITLE ☐ Change Abdition SI MONDS, JOE GOLDING, FRED NAME NAME 649 BALMOIZAL ROAD 107 CELIA LANE STREET ADDRESS STREET ADDRESS WINTER BARK, FL 32789-5204 CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SWALLOW, HAROLD G READ, CHUCK 1005 TEMPLE CODE NAME STREET ADDRESS 2999 EGLINGTON DR STREET ADDRESS ORLANDO, FL 328063366 CITY-ST-7/P CITY-ST-ZIP WILLER PARK, FL 32789 12. I hereby certify that the information supplied with this filting 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered 26 APRAY SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SHIRING OFFICER OR DIRECTOR

FILED