

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90036 006 ***150.00

NAS067N
 SP

DOCUMENT # P98000099511

1. Entity Name
AVIATION TRAINING, INC.

Principal Place of Business Mailing Address

7779 HERITAGE DRIVE **7779 HERITAGE DRIVE**
NAPLES FL 34112 **NAPLES FL 34112**



2. Principal Place of Business 3. Mailing Address

19940 CHAPEL TRACE **19940 CHAPEL TRACE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

ESTERO, FL **ESTERO, FL**

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For

65-0694924 Not Applicable

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

6. Name and Address of Current Registered Agent

ERICKSON, LOUIS S
2301 C.R. 951, SUITE F
NAPLES FL 34112

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 _____ (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.

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P	NAME	
STREET ADDRESS	HELMEY, JERRY A	STREET ADDRESS	19940 CHAPEL TRACE
CITY-ST-ZIP	7779 NAPLES HERITAGE DRIVE	CITY-ST-ZIP	ESTERO, FL 33928
CITY-ST-ZIP	NAPLES FL 34112	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VPS	NAME	
STREET ADDRESS	HELMEY, BARBARA A	STREET ADDRESS	19940 CHAPEL TRACE
CITY-ST-ZIP	7779 NAPLES HERITAGE DRIVE	CITY-ST-ZIP	ESTERO, FL 33928
CITY-ST-ZIP	NAPLES FL 34112	CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: *Jerry A. Helmey* **JERRY A. HELMEY 2-5-01 941-498-6104**

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)