

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Sep 13, 2000 08:00 AM**
Secretary of State**DOCUMENT # P99000085224****1. Entity Name**
FLIGHT DESIGN, INC.**Principal Place of Business**

7617 NARCOOSSEE ROAD

ORLANDO
32822

FL

Mailing Address

7617 NARCOOSSEE ROAD

ORLANDO
32822

FL

2. Principal Place of Business

7617 NARCOOSSEE ROAD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO

FL

City & State

ORLANDO

FL

4. FEI Number**59-3615742****Applied For**☐ Not Applicable**Zip**
328225541**Country**
US**Zip**
32822**Country**
US**5. Certificate of Status Desired**☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****BENDER JEFFREY A**
9993 ALOMA BEND LANE**OVIEDO**
32765 US FL**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**

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

(NOTE: Registered Agent signature required when reinstating)

09/13/2000

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****TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME **D BENDER WENDY J**
STREET ADDRESS **9993 ALOMA BEND LANE**
CITY-ST-ZIP **OVIEDO FL 32765****TITLE** ☐ Delete
NAME **D BENDER JEFFREY A**
STREET ADDRESS **9993 ALOMA BEND LANE**
CITY-ST-ZIP **OVIEDO FL 32765****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 **O ZINGER AMY L**
STREET ADDRESS **355 MIRANDY AVE**
CITY-ST-ZIP **MERRITT ISLAND FL 32953****TITLE** ☐ Change ☒ Addition
NAME **O BENDER WENDY J**
STREET ADDRESS **9993 ALOMA BEND LANE**
CITY-ST-ZIP **OVIEDO FL 32765****TITLE** ☒ Change ☐ Addition
NAME **D ZINGER TRAVIS M**
STREET ADDRESS **355 MIRANDY AVE**
CITY-ST-ZIP **MERRITT ISLAND FL 32953****TITLE** ☒ Change ☐ Addition
NAME **D BENDER JEFFREY A**
STREET ADDRESS **9993 ALOMA BEND LANE**
CITY-ST-ZIP **OVIEDO FL 32765****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** Jeffrey Bender

D 09/13/2000