FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S01522 (9)

1. Corporation Name

74 AERO CLUB, INC.

Principal Place of Business	Mailing Address
5363 DESMOND LANE ORLANDO FL 32821 US	5363 DESMOND LANE ORLANDO FL 32821 US

2. Principal Place of Business	2a. Mailing Address
21 1741 MOHAWK TRAIL	26 1741 MOHAWK TRAIL
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MAITLAND, FL	City & State 28 MAITLAND, FL
Zip 24 32751 Country 25 US	Zip 29 32751 Country 30 US

3. Date Incorporated or Qualified: 07/23/1990

3a. Date of Last Report: 05/01/1995

4. FEI Number: 59-3030915 ☐ 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 has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

KENNEDY, JAY R
5363 DESMOND LANE
ORLANDO FL 32821

10. Name and Address of New Registered Agent

81 Name: JOHN R. HENDERSON
82 Street Address (P.O. Box Number is Not Acceptable): 1741 MOHAWK TRAIL
83
84 City: MAITLAND FL 85 Zip Code: 32751

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: John R Henderson (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: 4-1-96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	☑ DELETE	1.1 TITLE	P ☑ Change ☐ Addition
NAME	KENNEDY, JAY R		1.2 NAME	BOB HAYDEN
STREET ADDRESS	5363 DESMOND LANE		1.3 STREET ADDRESS	4812 BRIDGEWATER DRIVE
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	ORLANDO, FL 32817
TITLE	S	☑ DELETE	2.1 TITLE	VP ☐ Change ☐ Addition
NAME	BONILA, RAMIREZ E		2.2 NAME	ED ROCKWELL
STREET ADDRESS	9315 SPRINGVALE DR		2.3 STREET ADDRESS	9320 S.M.V COURT
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	WINTER PARK, FL. 32817
TITLE	SD	☑ DELETE	3.1 TITLE	ST ☐ Change ☐ Addition
NAME	REED, JOHN E.		3.2 NAME	JOHN R. HENDERSON
STREET ADDRESS	1201 CORNERSTONE CT		3.3 STREET ADDRESS	1741 MOHAWK TRAIN
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	MAITLAND, FL. 32751
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: John R Henderson SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 4-1-96 Date — (407)629-2814 Daytime Phone #