

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

FILED
Aug 19 1996 8:00 am
Secretary of State

DOCUMENT # **S48082** (9)

1. Corporation Name

DOUGLAS AVIATION, INC.

Principal Place of Business

~~3816 NW 72ND DR.~~
~~CORAL SPRGS. FL 33065~~
US

Mailing Address

~~3816 NW 72ND DR.~~
~~CORAL SPRGS. FL 33065~~
US

2. Principal Place of Business

21 **P.O. Box 3812**

Suite, Apt. #, etc.

22
23 **BOCA RATON, FL**

24 **33427** 25 **USA**

2a. Mailing Address

26 **P.O. Box 3812**

Suite, Apt. #, etc.

27
28 **BOCA RATON, FL.**

29 **33427** 30 **USA**

3. Date Incorporated or Qualified
04/26/1991

3a. Date of Last Report
01/31/1995

4. FEI Number

65-0273844

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

DESZELL, DOUGLAS J.
~~3816 NW 72ND DR.~~
~~CORAL SPRGS. FL 33065~~

10. Name and Address of New Registered Agent

81 Name **DOUGLAS J. DESZELL**

82 Street Address (P.O. Box Number is Not Acceptable)
7501 N.W. 4TH ST, #110

83

84 City **PLANTATION**

FL 85 Zip Code **33317**

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 607.0504, Florida Statutes.

SIGNATURE

Douglas J. Deszell

Signature of Registered Agent (Signature Required for Filing)

4-30-96

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **DESZELL, DOUGLAS JAMES**
STREET ADDRESS ~~3816 NW 72ND DR.~~
CITY-ST-ZIP ~~CORAL SPRGS. FL~~

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **DESZELL, DOUGLAS JAMES** ☒ Change ☐ Addition
12 NAME **P.O. Box 3812 (N/A)**
13 STREET ADDRESS **BOCA RATON, FL. 33427-3812**
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 607.0504, 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:

Douglas J. Deszell, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96 (754) 345-2084
Date Daytime Phone

CR2E034 (12/95)