

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

DOCUMENT # S50030

(3)

1. Corporation Name

D-BAR-D AVIATION, INC.

Principal Place of Business

2650 SHILOH WAY
TALLAHASSEE FL 32308

Mailing Address

2650 SHILOH WAY
TALLAHASSEE FL 32308

3. Date Incorporated or Qualified

05/06/1991

3a. Date of Last Report

05/17/1994

2. Principal Place of Business

21 3226 CAPITAL CIR. S.W.

2a. Mailing Address

26 3226 CAPITAL CIR. S.W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

Tallahassee, FL

City & State

Tallahassee FL

Zip

32310

Country

US

Zip

32310

Country

US

4. FEI Number

59-3066983

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

DRANSFIELD, DALE L.

2650 SHILOH WAY

TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name

J.B. CURANI

82 Street Address (P.O. Box Number is Not Acceptable)

3226 CAPITAL CIRCLE S.W.

83

84 City

Tallahassee

FL

85 Zip Code

32310

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

J.B. CURANI

4/27/95

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

DRANSFIELD, DALE L.

STREET ADDRESS

2650 SHILOH WAY

CITY - ST - ZIP

TALLAHASSEE FL

TITLE

D

NAME

DRANSFIELD, PEGGY L.

STREET ADDRESS

2650 SHILOH WAY

CITY - ST - ZIP

TALLAHASSEE FL

TITLE

D

NAME

DRANSFIELD, D. LAMAR, JR.

STREET ADDRESS

2650 SHILOH WAY

CITY - ST - ZIP

TALLAHASSEE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

DIRECTOR

☒ Change

☐ Addition

1.2 NAME

WILLIAM H. HADLER

1.3 STREET ADDRESS

3226 CAPITAL CIRCLE S.W.

1.4 CITY - ST - ZIP

TALLAHASSEE, FL 32310

2.1 TITLE

DIRECTOR

☒ Change

☐ Addition

2.2 NAME

RICHARD L. LEDSON

2.3 STREET ADDRESS

3226 CAPITAL CIRCLE S.W.

2.4 CITY - ST - ZIP

TALLAHASSEE, FL 32310

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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, as applicable, or on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD L.

LEDSON

MAY 11, 1995

904562-9700