PROFIT CORPORATION ANNUAL REPORT 1999

Principal Place of Business 1000 N. HERCULES MAINTENANCE HANGAR

2. Principal Place of Business

CLEARWATER FL 34625

Suite, Apt. #, etc.

City & State -

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	S59592
SUNCOAST FLYING	SERVICES, INC.

25

ST. PETERSBURG FL 33710

WILBER, CHARLES 6742 3RD AVE N Mailing Address
1000 N. HERCULES
MAINTENANCE HANGAR

CLEARWATER FL 34625

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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9. Name and Address of Current Registered Agent

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90079 039 ***150.00

DO NOT WRITE IN TH	IS SPACE	`		
3. Date Incorporated or Qualifed				
06/10/1991				
4. FEI Number		Applied For		
59-3067243		Not Applicable		
5. Certificate of Status Desired	\$8.75 Additional Fee Required			
6. Election Campaign Financing	\$5:(00-мау ве		
Trust Fund Contribution	Added to Fees			
-6This corporation owes the current year I	Intangible			
Personal Property Tax.	Yes	□No		
10. Name and Address of New Registere	d Agent			

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

6742 3RD AVE. N.

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11. Pursuant to the provisions of Sections 607.0502 and 507.1508, 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 Printia, 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 principal of the provision of the provision of the purpose of changing its registered agent. I am familiar with, and accept the principal of the provision of the provision

Country 30

	11.40 4 101/17/11						
SIGNATURE	Signature, typed or pratied name of registered agent and title if applicable.	NOTE: Re	gistered Agent signature	required when reinstating)		DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITION	IS/CHANGES TO OFF	ICERS AND DIRECTOR	
TITLE	P /	☐ DELETE	1.1 TITLE		•	☐ Change	Addition
NAME	WILBER, JUSTIN		1.2 NAME				
STREET ADDRESS	6742 3RD AVE N		1.3 STREET ADDRESS	ĺ			
CITY-ST-ZIP	ST. PETERSBURG FL 33710		1.4 CITY-ST-ZIP				
TITLE	VP	DELETE	2.1 TITLE	Į		☐ Change	Addition
NAME	BENDER, JEFF		2.2 NAME				
STREET ADDRESS	6742 3RD AVE NO		2.3 STREET ADORESS				
CITY-ST-ZIP	-ST. PETERSBURG FL-33710		-2-4 CITY-ST-ZIP			M Change	Addition
TITLE	DS	DELETE	3.1 TITLE		•	La Criange	
NAME	WILBER, JUSTIN		3.2 NAME		الماعد		
STREET ADDRESS	7590 16TH AVE. N		3.3 STREET ADDRESS	6742 3RD A	VC. 74.	,	
CITY-ST-ZIP	ST. PETE FL		3.4. CITY-ST-ZIP	ST. AFTERSBURG	G. FL 33710		
nn.E	TD	DELETE	A1.TITLE			☐ Change	Addition
NAME	WILBER, MARIE		4. 2 NAME]			
STREET ADDRESS	7590 16TH AVE. N.		4.3 STREET ADDRESS	Ę			
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 CITY-ST-ZIP	ļ			Addition
TITLE		DELETE	5.1 TITLE	ĺ		☐ Change	T) vocation
NAME			5.2 NAME			·	
STREET ADDRESS			5.3 STREET ADDRESS]			•
CITY-ST-ZIP			5.4 CITY-ST-ZIP	ļ			- Addison
TITLE		DELETE	6.1 TITLE	1	•	☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS]			'
CITY-ST-ZIP	and the information complied with this filing charge		6.4 CITY- ST-ZIP	d in Coation 110 07/2	NO Florida Statutos 1	further certify that the in	formation

14. 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 annual report or supplemental annual report is true and statute and that my signature shall have the same legal effect as if made under outh; that it, am an officer or director of the corporation or the receiver or trusted employeered 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 a pattachment with the patterns, with all other like empowered.

SIGNATURE:

IREAND TYPED ON PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2/16/99

727-461-5229

CR2E034 (11/98)

Daytime Phone