

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Candice B. Norton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 FEB 23 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S67185

(6)

1. Corporation Name

TRANSAIR SERVICES CORPORATION

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/16/1991

3a. Date of Last Report
04/21/1994

4. FEI Number
59-3073871

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

2. Principal Place of Business

2a. Mailing Address

21
State, Apt. #, etc.

26
State, Apt. #, etc.

22
City & State

27
City & State

23
Zip

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Country

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Zip

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Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

A.G.C. CO.
2300 SUN BANK CENTER
ORLANDO FL

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

101
NAME
D
DELLER, DICK
901 VIA LUGANO
WINTER PARK FL
102
NAME
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DELLER, JESSICA
901 VIA LUGANO
WINTER PK FL
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STURGILL, KENNETH
3112 CURRY WOODS CIR
ORLANDO FL
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1.1 TITLE
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6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I, the undersigned, certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 on Block 12 or Block 13, as required, or on an attachment with an address.

SIGNATURE:

Jessica A. Delater
DIRECTOR AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/95

Signature (Typed Name)