

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90449 002 ***150.00

DOCUMENT # S98382

1. Entity Name
WILDER AVIATION SALES & LEASING, INC.



Principal Place of Business
**3000 GULF TO BAY BLVD.
6TH FLOOR
CLEARWATER, FL 33759 US**

Mailing Address
**3000 GULF TO BAY BLVD.
6TH FLOOR
CLEARWATER, FL 33759 US**

50015149



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3096246

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WILDER, MAURICE F
3000 GULF TO BAY BOULEVARD
6TH FLOOR
CLEARWATER, FL 33759**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD WILDER, MAURICE F 3000 GULF TO BAY BLVD, 6 FL CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD WILDER, COLBY M 3000 GULF TO BAY BLVD, 6 FL CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP CAROTENUTO, MARY 3000 GULF TO BAY BLVD CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06
Date

727-799-2111
Daytime Phone #