FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 06 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V60067

(8)

MID-FLORIDA AIR SERVICES, INC.

Principal Place of Business Mailing Address						
19708 EUSTIS AIRPORT RD. EUSTIS FL 32736 US		19706 EUSTIS AIRPORT RD EUSTIS FL 32736-7268 US				
				 Date Incorporated or Qualified 08/25/1992 	3a. Date of Last Report 08/06/1996	
_	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt.	# 040	26 Suite Ant # ste		65-0352575	Not Applicable	
	w, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,	
24	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Reg	Jistered Agent	
5 1970	ensen, John G. 18 Eustis Airport RD 1715 FL 32736		81 Name C	PKLESEN, JOHN dress (P.O. Box Number is Not Acceptab	G .	
500	113 FL 32/30		83			
			84 City		FL 85 Zip Code	
office or re agent, I a		of Florida. Such change was au	uthorized by the corpora	poration submits this statement for the patients board of directors. I hereby acceptions		
SIGNATURE	Signature, typed or printed name of registered ago:	nt and title if applicable (NOTE:	Registered Agent signature requ	uired when reinstating)	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	DPT	☐ DELETE	1.1 TITLE		Change Addition	
NAME	OKLESEN, JOHN G.		1.2 NAME			
STREET ADDRESS	19708 EUSTIS AIRPORT RD		1.3 STREET ADDRESS			
CITY-ST-ZIP	EUSTIS FL		1.4 CITY-ST-ZIP			
TITLE	DV8	☐ DELETE	2.1 TITLE		Change Addition	
NAME	OKLESEN, KATHY J.		2.2 NAME			
STREET ADDRESS	19708 EUSTIS AIRPORT RD		2.3 STREET ADDRESS			
CITY-ST-ZIP	EUSTIS FL	DELETE	2 4 CITY - ST - ZIP	.,	Change Addition	
TITLE NAME			3 1 TITLE 3.2 NAME		L_ change	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	1.	☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREE1 ADDRESS			
CITY-ST-ZIP	ou cortify that the information appoint	d with this filing does not explife	64 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes	Liuribor partify that the	
informatio I am an of appears it	flicer or director of the corporation or n Block 12 or Block 13 if changed or	upplemental annual report is tru the receiver or trustee empowe on an attachment with an addr	the and accurate and that tred to execute this repo ess.	thin section 19.07(g), Frontos statutes that my signature shall have the same legal ort as required by Chapter 607, Florida Si	l effect as if made under oath; that tatutes; and that my name	

CONSTUDE KA+ 65.16 WANDER OF DESCRIPTION OF THE BURNESS.