

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F93000004359 (6)**

1. Corporation Name

BEECHCRAFT SALES - SOUTHEAST, INC.



Principal Place of Business

2450 WESTSHORE BLVD
TAMPA FL 33607

Mailing Address

2450 WESTSHORE BLVD
TAMPA FL 33607

3. Date Incorporated or Qualified
09/27/1993

3a. Date of Last Report
06/16/1995

2. Principal Place of Business

2a. Mailing Address

21 **9709 E. Central**

26 **9709 E. Central**

4. FEI Number
48-1133077

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23 **Wichita KS**

28 **Wichita, KS**

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 **67206**

25

29 **67206**

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DM** DELETE
NAME **MCCRACKEN, MIKE**
STREET ADDRESS **2450 WESTSHORE BLVD**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE **DM** DELETE
NAME **BUCKALEW, JEFF**
STREET ADDRESS **3956 AVIATION CIRCLE**
CITY-ST-ZIP **ATLANTA GA 30336**

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME **Wayne W. Wallace**
3.3 STREET ADDRESS **7824 E. 10th St. Circle**
3.4 CITY-ST-ZIP **Wichita, KS 67206**

4.1 TITLE Change Addition
4.2 NAME **James E. Grey**
4.3 STREET ADDRESS **#9 St. James Place**
4.4 CITY-ST-ZIP **Wichita, KS 67206**

5.1 TITLE Change Addition
5.2 NAME **Richard R. Griffiths**
5.3 STREET ADDRESS **12930 Killenwood Dr**
5.4 CITY-ST-ZIP **Wichita, KS 67230**

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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James E. Grey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/96
Date

(316)676-7945
Daytime Phone #

CR2E034 (12/95)