

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # G17061

1. Corporation Name

FLIGHT INTERNATIONAL OF FLORIDA, INC.

Principal Place of Business

Mailing Address

**Newport News/Williamsburg Airport
Newport News, VA 23602**

**Newport News/
Williamsburg Airport
Newport News, VA 23602**

3. Date Incorporated or Qualified

3a. Date of Last Report

12/30/1982

06/30/1995

4. FEI Number

Applied For

58-1497376

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 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

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 beneath the signature of the registered agent.

(NOTE: Registered Agent's signature required when making change)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPD <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sandlin, David E.	12 NAME	
STREET ADDRESS	Newport News/WMSBRG Airport	13 STREET ADDRESS	
CITY - ST - ZIP	Newport News, VA 23602	14 CITY - ST - ZIP	
TITLE	EVPTCFO <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richmon, Wayne M	22 NAME	
STREET ADDRESS	Newport News/WMSBRG Airport	23 STREET ADDRESS	
CITY - ST - ZIP	Newport News, VA 23602	24 CITY - ST - ZIP	
TITLE	VPA <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Reinhart, Gary D	32 NAME	
STREET ADDRESS	Newport News/WMSBRG Airport	33 STREET ADDRESS	
CITY - ST - ZIP	Newport News, VA 23602	34 CITY - ST - ZIP	
TITLE	S <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Campbell, Ann P	42 NAME	
STREET ADDRESS	Newport News/WMSBRG Airport	43 STREET ADDRESS	
CITY - ST - ZIP	Newport News, VA 23602	44 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

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***225.00

gx 7/25/96

SIGNATURE:

Ann P. Campbell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ann P. Campbell

07/15/96

757-886-5605

CR2E034 (3/96)