

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K44535

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** AVIATION SERVICES & MANAGEMENT, INC.

**Current Principal Place of Business:**

% GERALD D. FRITZ  
719 FOX VALLEY DR.  
LONGWOOD, FL 32779 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 915722  
LONGWOOD, FL 327915722 US

**New Mailing Address:**

FEI Number: 59-2916051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRITZ, GERALD D.  
719 FOX VALLEY DRIVE  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FRITZ, GERALD D.  
Address: 719 FOX VALLEY DRIVE  
City-St-Zip: LONGWOOD, FL 32779 US

Title: PTS  
Name: FRITZ, GERALD D  
Address: 719 FOX VALLEY DRIVE  
City-St-Zip: LONGWOOD, FL 32779 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GERALD D. FRITZ

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04/16/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date