

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M97000000255

1. Entity Name

FLIGHTSAFETY BOEING TRAINING INTERNATIONAL L.L.C

FILED

01 JAN 22 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**C/O FLIGHTSAFETY INTERNATIONAL
MARINE AIR TERMINAL - LA GUARDIA AIRPORT
FLUSHING NY 11371-1061**

Mailing Address

**C/O FLIGHTSAFETY INTERNATIONAL
MARINE AIR TERMINAL - LA GUARDIA AIRPORT
FLUSHING NY 11371-1061**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

11-3372029

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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 \$50.00

Make Check Payable to Department of State

100003575971--0
-01/26/01--01023--020
*******50.00 *****50.00**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete
NAME **UELTSCHI, A L**
STREET ADDRESS **MARINE AIR TERMINAL - LA GUARDIA AIRPORT**
CITY-ST-ZIP **FLUSHING NY 11371**

TITLE ☐ Change ☒ Addition
NAME **CONTROLLER**
STREET ADDRESS **MARIO D'ANGELO**
CITY-ST-ZIP **149-15 10TH AV. WHITESTONE, NY 11357**

TITLE **MGR** ☐ Delete
NAME **WHITMAN, B N**
STREET ADDRESS **MARINE AIR TERMINAL - LA GUARDIA AIRPORT**
CITY-ST-ZIP **FLUSHING NY 11371**

TITLE ☐ Change ☒ Addition
NAME **PRESIDENT**
STREET ADDRESS **GARY SCOTT**
CITY-ST-ZIP **N8TH ST/PARK AV.N, BLDG 10-60, KENTON WA**

TITLE **MGR** ☐ Delete
NAME **WAUGH, J S**
STREET ADDRESS **MARINE AIR TERMINAL - LA GUARDIA AIRPORT**
CITY-ST-ZIP **FLUSHING NY 11371**

TITLE ☐ Change ☒ Addition
NAME **V.P. TREASURER**
STREET ADDRESS **K.W. MOTSCHWILLER**
CITY-ST-ZIP **41 BEDFORD AV. ROCKVILLE CENTRE, NY 11570**

TITLE **MGR** ☒ Delete
NAME **SCHICK, THOMAS**
STREET ADDRESS **N 8TH ST./PARK AVE. N, BLDG. 10-60, LOBBY**
CITY-ST-ZIP **KENTON WA 90855**

TITLE ☐ Change ☒ Addition
NAME **V.P. -SECRETARY**
STREET ADDRESS **THOMAS A. EFF**
CITY-ST-ZIP **400 EAST 85TH STREET NEW YORK, NY 10028**

TITLE **MGR** ☐ Delete
NAME **CVETOVICH, BRAD**
STREET ADDRESS **N 8TH ST./PARK AVE. N, BLDG. 10-60, LOBBY**
CITY-ST-ZIP **KENTON WA 90855**

TITLE ☐ Change ☒ Addition
NAME **ASSISTANT SECRETARY**
STREET ADDRESS **FLORA H. GIACCIO**
CITY-ST-ZIP **150-35 28TH. AV. FLUSHING, NY 11354**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **MANAGER**
STREET ADDRESS **BRYAN GERARD**
CITY-ST-ZIP **1901 OAKESDALE AVENUE SW RENTON, WA 98055**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Mario D'Angelo

MARIO D'ANGELO-CONTROLLER

1/11/01

718-565-4144

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)

0031816
SP