

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 APR 30 PM 2:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P99000060649  
**1. Entity Name**  
 Atlantic Coast Helicopters, Inc.

**DO NOT WRITE IN THIS SPACE**

<b>2. Principal Place of Business</b> 5065 Highway A1A <small>Suite, Apt. #, etc.</small>	<b>3. Mailing Address</b> 5065 Highway A1A <small>Suite, Apt. #, etc.</small>
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DO NOT WRITE IN THIS SPACE

<b>City &amp; State</b> Vero Beach, Florida	<b>City &amp; State</b> Vero Beach, Florida
<b>Zip</b> 32963	<b>Country</b> USA

<b>4. FEI Number</b> 58-2478093	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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**DO NOT WRITE IN THIS SPACE**

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**7. Name and Address of Current Registered Agent**

<b>Name</b> Thomas F. Panza	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> c/o Panza, Maurer & Maynard, P.A.	
<b>3600 North Federal Highway, 3<sup>rd</sup> Floor</b>	
<b>City</b> Ft. Lauderdale	<b>FL</b> <b>Zip Code</b> 33308

**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** **Thomas F. Panza** **4/23/02**  
DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.**  (See criteria on back)

January 15 Fee is \$150.00  
 After May 15 Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Department of State

**10. Election Campaign Financing Trust Fund Contribution.**  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & Director Guy B. Snowden 5065 Highway A1A Vero Beach, Florida 32963	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9000005554629-8 -05/16/02--01032--025 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Diane P. Snowden 5065 Highway A1A Vero Beach, Florida 32963	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President John E. Taylor, Jr. 5065 Highway A1A Vero Beach, Florida 32963	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Louis R. Malikow 5065 Highway A1A Vero Beach, Florida 32963	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

CR2E034B (12/01)

**13. 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 or supplemental 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 11 or on an attachment with an address, with proper title, empowered.**

**SIGNATURE:** **John E. Taylor, Jr.** **04.17.02** **772.231.5858**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #