

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K44535

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

**Current Principal Place of Business:**

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

**Current Mailing Address:**

P O BOX 915722  
LONGWOOD, FL 32791-5722 US

**FEI Number: 59-2916051**

**Certificate of Status Desired: No**

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

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

*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

**Officer/Director Detail :**

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

*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**

**PRESIDENT**

**04/13/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date