

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000031945

**Entity Name:** FLORIDA AIR EXPRESS AIRLINES INC.

**Current Principal Place of Business:**

ONE TERMINAL PARKWAY  
MELBOURNE INTERNATIONAL AIRPORT  
MELBOURNE, FL 32902

**Current Mailing Address:**

558 GRAND CONCOURSE  
BOX 2, GPO  
THE BRONX, NY 10451 US

**FEI Number:** 45-0575621

**Certificate of Status Desired:** No

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

ROBINSON, JANET T.  
1261 WOLSEY DRIVE  
MAITLAND, FL 32751 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:** JANET TUCKER ROBINSON

01/08/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN & CHIEF EXECUTIVE OFFICER  
Name GILLEAD, LEROY II  
Address 558 GRAND CONCOURSE GPO, BOX 2  
City-State-Zip: THE BRONX NY 10451-0002

Title EXVP  
Name RICCIUTI, MARTIN  
Address 3825 N. 49TH DRIVE  
City-State-Zip: KANSAS CITY KS 66104

Title DIRECTOR - CREW RESOURCES  
Name ROBINSON, JANET T.  
Address 1261 WOLSEY DRIVE  
City-State-Zip: MAITLAND FL 32751

Title FOREIGN REPRESENTATIVE - EUROPE  
Name WILTSHIRE, H. A. III  
Address N/A  
City-State-Zip: MADRID

Title SRVP  
Name WALKER, JOHN E  
Address 1562 SW MERIDIAN AVENUE  
City-State-Zip: PORT ST. LUCIE FL 34953

Title EXVP  
Name HARRIS, BILL  
Address 360-23 W. SCHICK RD. # 228  
City-State-Zip: BLOOMINGDALE IL 60108

Title AIR OPERATIONS/PILOT - ADVISOR/CONSULTANT  
Name HARRISON, JAMES III  
Address 36 DEWEY STREET  
City-State-Zip: BLOOMFIELD NJ 07003

Title FOREIGN REPRESENTATIVE -  
Name BATUTTA, THELMA  
Address N/A  
City-State-Zip: ACCRA

*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:** LEROY GILLEAD

CHMN & CEO

01/08/2018

Electronic Signature of Signing Officer/Director Detail

Date