

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000060649

**Entity Name:** ATLANTIC COAST HELICOPTERS, INC.

**Current Principal Place of Business:**

3505 OCEAN DRIVE  
VERO BEACH, FL 32963

**Current Mailing Address:**

3505 OCEAN DRIVE  
VERO BEACH, FL 32963 US

**FEI Number: 58-2478093**

**Certificate of Status Desired: No**

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

PANZA, THOMAS FESQ  
C/O PANZA, MAURER & MAYNARD, PA  
3600 NO. FEDERAL HWY, 3RD FLOOR  
FT LAUDERDALE, FL 33308 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 PD  
Name SNOWDEN, GUY B  
Address 3505 OCEAN DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title VP  
Name SNOWDEN, DIANE P  
Address 3505 OCEAN DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title S, VP  
Name MALIKOW, LOUIS R  
Address 3505 OCEAN DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR  
Name ZIMMER, JEFFREY J  
Address 3505 OCEAN DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title ASST. SECRETARY  
Name HELLER, RUTH A  
Address 3505 OCEAN DRIVE  
City-State-Zip: VERO BEACH FL 32963

*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: LOUIS R MALIKOW**

**SECRETARY**

**02/22/2018**

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

\_\_\_\_\_  
Date