

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000000794

Entity Name: ATLANTIC AVIATION FBO, INC.**Current Principal Place of Business:**6652 PINECREST DRIVE
SUITE 300
PLANO, TX 75024**Current Mailing Address:**6652 PINECREST DRIVE
SUITE 300
PLANO, TX 75024 US**FEI Number:** 20-1301856**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 CEO, DIRECTOR
Name PEPPER, LOUIS T
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

Title TREASURER
Name BECKHAM, MARLA
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

Title VP, DIRECTOR
Name WEINTRAUB, TODD ERIC
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

Title DIRECTOR
Name DAVIS, JAY
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

Title DIRECTOR
Name HOOKE, JAMES
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

Title DIRECTOR
Name MAY, JAMES
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

Title DIRECTOR
Name MONTFORD, JOHN
Address 6652 PINECREST DRIVE
SUITE 300
City-State-Zip: PLANO TX 75024

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 T. PEPPER**CHIEF EXECUTIVE
OFFICER****04/19/2015**

Electronic Signature of Signing Officer/Director Detail

Date