

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000004536

**FILED**  
**Mar 17, 2014**  
**Secretary of State**  
**CC0121453554**

**Entity Name:** FLIGHTSAFETY SERVICES CORPORATION

**Current Principal Place of Business:**

10770 E. BRIARWOOD AVE  
SUITE 100  
CENTENNIAL, CO 80112-3807

**Current Mailing Address:**

10770 E. BRIARWOOD AVE  
SUITE 100  
CENTENNIAL, CO 80112-3807 US

**FEI Number:** 36-3244473

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRES  
Name            LADNIER, RONALD R  
Address        10770 E. BRIARWOOD AVE  
                 SUITE 100  
City-State-Zip: CENTENNIAL CO 80112-3807

Title            VP  
Name            GASSER, YVONNE J  
Address        10770 E. BRIARWOOD AVE, SUITE 100  
City-State-Zip: CENTENNIAL CO 80112-3807

Title            DIR  
Name            WHITMAN, BRUCE N  
Address        MARINE AIR TERMINAL-LAGUARDIA  
                 AIRPORT  
City-State-Zip: FLUSHING NY 11371-1061

Title            DIR  
Name            MOTSCHWILLER, KENNETH  
Address        MARINE AIR TERMINAL-LAGUARDIA  
                 AIRPORT  
City-State-Zip: FLUSHING NY 11371-1061

*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:** YVONNE GASSER

VP

03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date