

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000005003

**Entity Name:** ASCENT AVIATION GROUP, INC.

**Current Principal Place of Business:**

ONE MILL STREET  
PARISH, NY 13131

**FILED**  
**Jan 18, 2016**  
**Secretary of State**  
**CC0069084867**

**Current Mailing Address:**

ONE MILL STREET  
PARISH, NY 13131

**FEI Number: 16-1353957**

**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 P  
Name RAU, JOHN  
Address 9800 NW 41 STREET  
City-State-Zip: MIAMI FL 33178

Title D  
Name BIRNS, IRA M  
Address 9800 NW 41ST #400  
City-State-Zip: MIAMI FL 33178

Title D  
Name FRANCIS, SHEA X  
Address 9800 NW 41ST #400  
City-State-Zip: MIAMI FL 33178

Title SR. VICE PRESIDENT AND  
TREASURER  
Name URBAN, ADRIENNE  
Address 9800 NW 41 STREET  
City-State-Zip: MIAMI FL 33178

Title S  
Name LAKE, ALEXANDER R  
Address 9800 NW 41ST #400  
City-State-Zip: MIAMI FL 33178

Title SVP-FINANCE  
Name MCMICHAEL, RICHARD D  
Address 4800 NW 41ST #400  
City-State-Zip: MIAMI FL 33178

Title ASST. SECRETARY  
Name QUINTANA, AMY A  
Address 9800 NW 41ST #400  
City-State-Zip: MIAMI FL 33178

*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: AMY A QUINTANA**

**ASST. SECRETARY**

**01/18/2016**

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

\_\_\_\_\_  
Date