## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004022

**Entity Name: JETBLUE AIRWAYS CORPORATION** 

**Current Principal Place of Business:** 

27-01 QUEENS PLAZA NORTH LONG ISLAND CITY, NY 11101

**Current Mailing Address:** 

27-01 QUEENS PLAZA NORTH LONG ISLAND CITY. NY 11101

FEI Number: 87-0617894 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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

Officer/Director Detail:

 Title
 CEO
 Title
 SECRETARY

 Name
 HAYES, ROBIN
 Name
 HNAT, JAMES

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: LONG ISLAND CITY NY 11101

Title VP Title ASSISTANT SECRETARY

Name POWERS, MARK Name LIPPI, CHRIS

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: LONG ISLAND CITY NY 11101

Title TREASURER Title VP

Name LEDDY, JIM Name CHATKEWITZ, ALEXANDER

Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101

City-State-Zip: LONG ISLAND CITY NY 11101

Title BOARD OF DIRECTOR Title BOARD OF DIRECTOR

Name PETERSON, JOEL Name SICA, FRANK

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101

City-State-Zip: LONG ISLAND CITY NY 11101

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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: CHRIS LIPPI ASSISTANT SECRETARY 04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 15, 2016

Secretary of State

CC1430795309

Date

## Officer/Director Detail Continued:

 Title
 BOARD OF DIRECTOR
 Title
 BOARD OF DIRECTOR

 Name
 CHECKETTS, DAVID
 Name
 GAMBALE, VIRGINIA

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH
City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: LONG ISLAND CITY NY 11101

TitleBOARD OF DIRECTORTitleBOARD OF DIRECTORNameGEMKOW, STEPHANNameBONEPARTH, PETER

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: LONG ISLAND CITY NY 11101

TitleBOARD OF DIRECTORTitleBOARD OF DIRECTORNameMCCHRYSTAL, STANLEYNameBISCHOF, JENS

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: LONG ISLAND CITY NY 11101

TitleBOARD OF DIRECTORTitlePRESIDENTNameJEWETT, ELLENNameHAYES, ROBIN

Address 27-01 QUEENS PLAZA NORTH Address 27-01 QUEENS PLAZA NORTH
City-State-Zip: LONG ISLAND CITY NY 11101 City-State-Zip: LONG ISLAND CITY NY 11101

Title BOARD OF DIRECTOR Title BOARD OF DIRECTOR

Name WINKELMANN, THOMAS Name HAYES, ROBIN

Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101

Address 27-01 QUEENS PLAZA NORTH

City-State-Zip: LONG ISLAND CITY NY 11101