2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # 856017

1. Entity Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

1006 PATINA POINT

PEACHTREE CITY GA

SKINNER, RENEE H.

PEACHTREE CITY GA

107 TAMERLANE

AVD

Principal Place of Business

ATLANTIC SOUTHEAST AIRLINES, INC.

100 Hartsfield Centre Parkway Suite 800 Atlanta ga 30354-1256		100 HARTSFIELD CENTRE PARKWAY SUITE 800 ATLANTA GA 30354-1356			# 100101 LD(0)	A AA B B AAAA BBAB A AA B AA 18	ri Riðii Glāli: Glāli Glali G	N a ki a kati (Ta i	
2. Principal Place of Business		3. Mailing Address		-					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number	58-1354495		applied For	
Zip Country		Zip	Country		5. Certificate of	Status Desired	□ \$8.75 Ac Fee Requir	dditional	
	6. Name and Address of Curre	nt Registered Agent	<u></u>		7. Name and Ac	dress of New Reg	istered Agent		
			Na	Name					
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET			Str	et Address (P.O. Box Number is Not Acceptable)					
SUITE 105 TALLAHASSEE FL 32301			1					}	
			City	City FL Zip Code					
Tax filing	Signature, typed or printed name of registered as poration is eligible to satisfy its Intang requirement and elects to do so, aria on back)	ble FILE NOW After MAY 1, 20	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Si			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
11.	OFFICERS AI	ND DIRECTORS	12.		ADDITIONS/CH	IANGES TO OFFICE	ERS AND DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO PICKET, GEORGE F. 824 BRYWYCK RD. ATLANTA GA	X Delete	TITLE NAME STREET ADDI CITY-ST-ZIF	RESS 508	dent s skip light How whitee	Barnette Se Jane City, GA	Change 30269	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEISER, JOHN W.	€ Delete	TITLE NAME STREET ADDI CITY-ST-ZIP	ress 1030 Atla	Delta B unta, Gi	lvd 9 30320	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SAPP, RONALD V 9275 BETONY WOOD TR. JONESBORO GA 30236	∑ Delete	TITLE NAME STREET ADDI CITY-ST-ZIF	Tet 1030	IP- Jinon If Simm Delta B Canta (vana)	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WATTS, SAM	☐ Delete	TITLE NAME STREET ADDI CITY-ST-ZIP	RESS	<u> </u>	<u>,, </u>	☐ Change	Addition	
TITLE NAME	VP FISCHER, MARK	☐ Delete	TITLE NAME				☐ Change	☐ Addition	

FILED

May 04, 2000 8:00 am Secretary of State

☐ Change

XI Addition

05-04-2000 90024 038 ***150.00

Jeffrey Simmons VP=Finance & CFO_4/28/00 404-715-5013 R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Delete