

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90031 027 ***150.00

DOCUMENT # 856017

1. Entity Name
ATLANTIC SOUTHEAST AIRLINES, INC.

Principal Place of Business
**100 HARTSFIELD CENTRE PARKWAY
 SUITE 800
 ATLANTA GA 30354-1256**

Mailing Address
**100 HARTSFIELD CENTRE PARKWAY
 SUITE 800
 ATLANTA GA 30354-1256**

00099123



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
**1030 DELTA BLVD
 Suite, Apt. #, etc.
 Dept. 852
 ATLANTA, GA
 City & State
 Zip
30354
 Country
U.S.**

4. FEI Number: **58-1354495**
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BARNETTE, W E S	508 LIGHT HOUSE LANE	PEACHTREE CITY GA 30269	<input type="checkbox"/>
S	ARVIDSON, DEAN C	1030 DELTA BLVD.	ATLANTA GA 30320	<input type="checkbox"/>
VFC	SIMMONS, JEFF	1030 DELTA BLVD	ATLANTA GA 30320	<input checked="" type="checkbox"/>
VP	WATTS, SAM	120 TERANE RIDGE	PEACHTREE CITY GA	<input type="checkbox"/>
VP	FISCHER, MARK	1008 PATINA POINT	PEACHTREE CITY GA	<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE: DEAN C. ARVIDSON SECRETARY
 DEAN C. ARVIDSON Secretary
 Date: 4/17/2002 Daytime Phone #: 404-715-5013

CR2E034 (9/01)