

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000002539

1. Entity Name

EXECUTIVE AIR SUPPORT, INC.

FILED

Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90224 044 ***150.00

Principal Place of Business

1235 WESTLAKES DRIVE, SUITE 310
BERWYN PA 19312

Mailing Address

1235 WESTLAKES DRIVE, SUITE 310
BERWYN PA 19312

2. Principal Place of Business

4310 Amelia Earhart

3. Mailing Address

PO Box 2469

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Addison, Texas

City & State

Addison, Texas

Zip

75001

Country

USA

Zip

75001

Country

USA

4. FEI Number

23-3018903

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
PEPPER, LOUIS T
4310 AMELIA EARHART
ADDISON TX 75001

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
J. Colin Keith
551 Madison Ave, 7th Floor
New York, New York 10022

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
JANAS, ANDREW K
1235 WESTLAKES DRIVE, SUITE 310
BERWYN PA 19312

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Robert D. Kunisch
307 International Circle, 5th Floor
Hart Valley, MD 21030

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
VACEK, RICHARD
1235 WESTLAKES DRIVE, SUITE 310
BERWYN PA 19312

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Peter V. Del Presto
3150 CNR Tower, 625 Liberty Ave
Pittsburgh Pa 15222

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
SHAFFERT, THOMAS K
1235 WESTLAKES DRIVE, SUITE 310
BERWYN PA 19312

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Gary Zentner
3150 CNR Tower, 625 Liberty Ave
Pittsburgh Pa 15222

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MILLS, CHRISTOPHER
1235 WESTLAKES DRIVE, SUITE 310
BERWYN PA 19312

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HEBB, DONALD B JR.
1 SOUTH STREET, 25TH FLOOR
BALTIMORE MD 21202

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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 or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/01

Date

610-640-4900

Daytime Phone #

CR2E034 (10/00)