


**FILED**  
**Jan 21, 2005 8:00 am**  
**Secretary of State**

01-21-2005 90050 028 \*\*\*150.00

**2005 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

<b>DOCUMENT # F01000006534</b>					
1. Entity Name <b>SKYWEST AIRLINES, INC.</b>					
Principal Place of Business <b>444 SO. RIVER ROAD ST. GEORGE, UT 84770</b>			Mailing Address <b>185 SOUTH STATE SUITE 1300 SALT LAKE CITY, UT 84111</b>		
<b>50004773</b>					
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01102005    Chg-P    CR2E034 (10/03)	
Zip		Country		4. FEI Number <b>87-0426325</b> Applied For Not Applicable	
6. Name and Address of Current Registered Agent				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>CT CORPORATION SYSTEM          C/O CT CORPORATION SYSTEM          1200 SOUTH PINE ISLAND RD.          PLANTATION, FL 33324-2525</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO ATKIN, JERRY C 444 SO. RIVER ROAD ST. GEORGE, UT 84770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Michael J. Kraupp 444 So. River Road St. George, UT 84770	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCOO REBER, RON B 444 SO. RIVER ROAD ST. GEORGE, UT 84770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CHRISTENSEN, ERIC D 444 SO. RIVER ROAD ST. GEORGE, UT 84770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HART, STEVEN 444 SO. RIVER ROAD ST. GEORGE, UT 84770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BOYD, JAMES K 444 SO. RIVER ROAD ST. GEORGE, UT 84770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOLT, BRAD 444 SO. RIVER ROAD ST. GEORGE, UT 84770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____			Date: <b>1-11-05</b> Daytime Phone #: <b>435 634-3000</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR					

**PARR WADDOUPS BROWN**  
**GEE & LOVELESS** A Professional Corporation  
 Attorneys at Law

GENERAL ACCOUNT  
 185 S. STATE ST., SUITE 1300  
 SALT LAKE CITY, UTAH 84111  
 (801) 532-7840

**ATTACHMENT No 34176**

*A Fo 1000006534*

BANK ONE, N.A.  
 SECOND SOUTH & STATE ST. OFFICE (34)  
 185 SOUTH STATE STREET  
 SALT LAKE CITY, UTAH 84111  
 97-154/1240

*50004773*

PAY One hundred fifty dollars and no/100

TO THE ORDER OF Florida Dept of State

DATE 1-17-05 AMOUNT \$ 150.00

*Beverly Bellamy*  
*Ann Hart*

⑈0034176⑈ ⑆124001545⑆

912454114⑈

SP2000 CARBONLESS IC SECURITY PRINTERS, INC.

P A Y E E : DETACH THIS STATEMENT BEFORE DEPOSITING CHECK

**PARR WADDOUPS BROWN GEE & LOVELESS - S.L.C., Utah 84111**  
**General Account**

DATE	INVOICE NO.	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		2005 annual report #31560,1		(427)	150.00