## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000001726

Entity Name: PRIMEFLIGHT AVIATION SERVICES, INC.

FILED Jan 25, 2005 Secretary of State

| •   |  |                                  |                                     |                                  |   |  |
|---|--|----------------------------------|-------------------------------------|----------------------------------|---|--|
| Current Principal Place of Business:        |  |                                  |                                     | New Principal Place of Business: |   |  |
| SUITE 100                                   |  |                                  |                                     |                                  |   |  |
| NASHVILL                                    | .E, TN 372095  | 015 US                           |                                     |                                  |   |  |
| Current Mailing Address:                    |  |                                  |                                     | New Mailing Address:             |   |  |
| SUITE 100                                   | RLOTTE PIKE<br>)<br>.E, TN 372095                        | 015 US                           |                                     |                                  |   |  |
| FEI Number:                                 | : 04-3608554   | FEI Number Applied For ( )       | FEI Number N                        | ot Applicable ( )                | Certificate of Status Desired ( )   |  |
| Name and                                    | Address of C   | urrent Registered Agent:         | Nam                                 | e and Address                    | of New Registered Agent:  |  |
| 1200 SOU                                    | PORATION SYS<br>TH PINE ISLAN<br>ON, FL 33324            | ND ROAD                          |                                     |                                  |   |  |
|   | named entity s<br>e of Florida.                          | submits this statement for the p | ourpose of chan                     | ging its registe                 | red office or registered agent, or both,  |  |
| SIGNATUR                                    | ⊋F·  |                                  |                                     |                                  |   |  |
| 0.014, (1.01                                |  | ic Signature of Registered Age   | ent                                 |                                  | <br>Date  |  |
| Election Cor                                |  | Trust Fund Contribution ( ).     |                                     |                                  |   |  |
|   | S AND DIREC  | ,                                | ADD                                 | ITIONS/CHAN                      | GES TO OFFICERS AND DIRECTORS:  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | CEOP ()<br>COAKLEY, WIL<br>202 SUNNYSID<br>NASHVILLE, TN | E DRIVE                          | Title:<br>Name:<br>Addre:<br>City-S | ss: 7135 CH/                     | (X) Change()Addition<br>I, KEITH G<br>ARLOTTE PIKE<br>LE, TN 372095015          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VP ()<br>WOLKEN, KEIT<br>4365 CHICKER<br>NASHVILLE, TN   | ING LANE                         | Title:<br>Name:<br>Addres<br>City-S | ss: 7135 CH/                     | (X) Change () Addition<br>AMM A<br>ARLOTTE PIKE<br>LE, TN 372095015 US          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | ST ()<br>EMERSON, T. S<br>1317 CHESTNU<br>BRENTWOOD,     | IT DRIVE                         | Title:<br>Name:<br>Addres<br>City-S | ss: 7135 CH/                     | (X) Change () Addition<br>AMM A<br>ARLOTTE PIKE<br>LE, TN 372095015 US          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()<br>WOLKEN, GER<br>1555 KILBIRNIE<br>FT. MYERS, FL   | E DRIVE SE                       | Title:<br>Name:<br>Addre:<br>City-S | ss: 7135 CH/                     | (X) Change()Addition<br>I, KEITH G<br>ARLOTTE PIKE<br>LE, TN 372095015 US       |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()<br>RILEY, JR., THO<br>517 HIGHLAND<br>HAMILTON, MA  | ST.                              | Title:<br>Name:<br>Addre:<br>City-S | ss: 11145 JA                     | (X) Change()Addition<br>I, GERALD L<br>RDIN RD<br>ATI, OH 452416629 US          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()<br>COAKLEY, WIL<br>202 SUNNYSID<br>NASHVILLE, TN    | E DRIVE                          | Title:<br>Name:<br>Addre:<br>City-S | ss: 901 ADAN                     | (X) Change ( ) Addition<br>PATRICK R JR.<br>MS CROSSING<br>ATI, OH 452021685 US |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HIRAM A. COX SECR 01/25/2005