

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005365

FILED
Jul 31, 2009
Secretary of State

Entity Name: WAS AVIATION SERVICES, INC.

Current Principal Place of Business:

100 PEMCO DRIVE
DOTHAN, AL 36303

New Principal Place of Business:

Current Mailing Address:

100 PEMCO DRIVE
DOTHAN, AL 36303

New Mailing Address:

FEI Number: 26-0535661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, CHRIS
4102 N WEST SHORE BLVD
TAMPA, FL 336147763 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BECKER, MARK
Address: 5200 TOWN CENTER CIRCLE, STE 600
City-St-Zip: BOCA RATON, FL 33487

Title: CEO () Delete
Name: SMITH, WAKE
Address: 100 PEMCO DRIVE
City-St-Zip: DOTHAN, AL 36303

Title: DVP () Delete
Name: METZ, CHRISTOPHER
Address: 5200 TOWN CENTER CIR, STE 600
City-St-Zip: BOCA RATON, FL 33487

Title: CFOT () Delete
Name: WALKER, CHRIS
Address: 100 PEMCO DRIVE
City-St-Zip: DOTHAN, AL 36303

Title: VP () Delete
Name: TALARICO, GARY
Address: 375 PARK AVENUE, STE 1302
City-St-Zip: NEW YORK, NY 10152

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHRIS WALKER

CFOT

07/31/2009

Electronic Signature of Signing Officer or Director

Date