

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005367

FILED
Apr 18, 2011
Secretary of State

Entity Name: WAS AVIATION SERVICES HOLDING CORP.

Current Principal Place of Business:

100 PEMCO DRIVE
DOTHAN, AL 36303

New Principal Place of Business:

4102 N WESTSHORE BLVD
TAMPA, FL 33614

Current Mailing Address:

100 PEMCO DRIVE
DOTHAN, AL 36303

New Mailing Address:

4102 N WESTSHORE BLVD
TAMPA, FL 33614

FEI Number: 26-0535698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: METZ, CHRISTOPHER
Address: 5200 TOWN CENTER CIR, STE 600
City-St-Zip: BOCA RATON, FL 33486

Title: D
Name: MUELLER, DON
Address: 5200 TOWN CENTER CIR, STE 600
City-St-Zip: BOCA RATON, FL 33486

Title: TCFO
Name: SHEIL, PJ
Address: 4102 N WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33614

Title: PCEO
Name: SMITH, WAKE
Address: 4102 N WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33614

Title: VPAS
Name: MCCONVERY, MICHAEL
Address: 5200 TOWN CENTER CIR, STE 600
City-St-Zip: BOCA RATON, FL 33486

Title: VPAT
Name: KLAFTER, MELISSA
Address: 5200 TOWN CENTER CIR, STE 600
City-St-Zip: BOCA RATON, FL 33486

I hereby 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 all other like empowered.

SIGNATURE: PJ SHEIL

CFO

04/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date