FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 05, 2002 8:00 am F92000000808 DOCUMENT # **Secretary of State** 1. Entity Name 02-05-2002 90128 022 ***150.00 RAYTHEON AIRCRAFT SERVICES, INC. Principal Place of Business Mailing Address 10225 E KELLOGG PO BOX 2966 WICHITA KS 67207 WICHITA KS 67201 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 48-0677338 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE **CPD** ☐ Delete TITLE Change M Addition David G. Jacobson WILLIS, JOHN C NAME NAME 8201 E. Harry 8220 E. OXFORD CIRCLE #10106 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WICHITA K\$ 67226 CITY-ST-ZIE Wichita KS 67207 TITLE ☐ Delete TITLE Change ☐ Addition NAME LAYMON, KEVIN NAME STREET ADDRESS 1770 S. ROCK RD. APT. 515 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WICHITA KS 67207 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BRANTNER, DOUGLAS NAME STREET ADDRESS 607 GLENDEVON CT STREET ADDRESS CITY-ST-ZIP ANDOVER KS CITY-ST-ZIF TITLE VD. ☐ Delete TITLE ☐ Change ☐ Addition HAGEL, JOHN W JR. NAME NAME STREET ADDRESS 945 GLENEVON CT STREET ADDRESS CITY-ST-ZIP ANDOVER KS CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change KNOTT, LARRY S NAME STREET ADDRESS 7102 W. CLEARMEADOW CT STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP WICHITA KS 67205 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP 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

SIGNATURE:



changed, or on an attachment with an address, with all other like empowered