FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000000760 (8)**

1. Corporation Name
AIR TRANSPORTATION HOLDING COMPANY, INC.

Principal Place of Business
3524 AIRPORT RD
LITTLE MOUNTAIN AIRPORT
MAIDEN NC 28650
US

Mailing Address
P O BOX 488
LITTLE MOUNTAIN AIRPORT
DENVER NC 28037
US

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City, & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City, & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 02/16/1994
3a. Date of Last Report: 05/30/1995
4. FEI Number: 52-1206400 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature of a Member or Agent authorized to act in capacity indicated above — Registered Agent Signature required if letter is filed — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	President ☐ Change ☑ Addition
NAME	ABERNATHY, CLAUDE S	1.2 NAME	DAVID CLARK ①
STREET ADDRESS	S. COLLEGE AVE.	1.3 STREET ADDRESS	PO Box 488
CITY-ST-ZIP	NEWTON NC 28658	1.4 CITY-ST-ZIP	DENVER NC 28037
TITLE	D ☐ DELETE	2.1 TITLE	Director ☐ Change ☑ Addition
NAME	PRILL, GEORGE C	2.2 NAME	TERRY SANFORD ①
STREET ADDRESS	20 ADLER CIR.	2.3 STREET ADDRESS	Duke University PO Box 90871
CITY-ST-ZIP	GALVESTON TX 77551	2.4 CITY-ST-ZIP	Durham, NC 27708-0871
TITLE	D ☐ DELETE	3.1 TITLE	Director ☐ Change ☑ Addition
NAME	CHESTNUTT, SAM	3.2 NAME	LEONARD MARTIN ①
STREET ADDRESS	10548 CROTON RD	3.3 STREET ADDRESS	2518 Reynolds DR.
CITY-ST-ZIP	JOHNSTON OH	3.4 CITY-ST-ZIP	Winston Salem NC 27104
TITLE	DV ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	GIOFFRE, JOHN J	4.2 NAME	
STREET ADDRESS	P.O. BOX 488 N/A	4.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER NC	4.4 CITY-ST-ZIP	
TITLE	DV ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	BINGHAM, J. HUGH	5.2 NAME	
STREET ADDRESS	P.O. BOX 488 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER NC	5.4 CITY-ST-ZIP	
TITLE	DV ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	SIMPSON, WILLIAM H	6.2 NAME	
STREET ADDRESS	P.O. BOX 488 N/A	6.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER NC	6.4 CITY-ST-ZIP	

① above directors/officers were listed last year but omitted this year and are related above

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/96 — 704-464-5271
Date — Daytime Phone #