FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address
P O BOX 488

LITTLE MOUNTAIN AIRPORT

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

3524 AIRPORT RD LITTLE MOUNTAIN AIRPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 24 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400000760 (8)

AIR TRANSPORTATION HOLDING COMPANY, INC.

SIGNATURE:

US				US	US US					02/16/1994						
2. Pri	ncipal Place of Bu	siness		2a. M	2a. Mailing Address					4. FEI Number			A	oplied For		
21				26	26					52-120640	0			ot Applicable		
Su 22	ite Apt.# etc			27 S	Suite, Apt. #, etc.					5. Certificate of Sta	atus Desired		4	Additional equired		
City & State					City & State					6. Election Campa	ign Financing		\$5.00	May Be		
23					28					Trust Fund Conf	ribution		Added	to Fees		
Žψ)	Country Zip			iÞ.	Country			1	8. This corporation has liability for intangible tax under s. 199.032,						
24 25 29							30			Florida Statutes Yes No						
9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent							
C T CORPORATION SYSTEM								81 Name								
	1290 S. PIN		8:	82 Street Addr			(P.O. Box Number	is Not Acceptat	ole)							
	PLÄNTATIOI	I FL 33	i324		83						······································					
	•					8	-	City					OE 7in	Code		
	,					9	1	City				FL	85 Zip			
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. SIGNATUME																
SIGN		pied or prin	ited name of tegs seed	agent and trie if a	pplicable (NO	Te: Registered A	gent	signature r	required w			DATE				
12.			OFFICERS A	AND DIRECT		13.				ADDITIONS/CHA	INGES TO OFFI	CERS AND				
THE	D				☐ DELETE	1.1 TITLE				if the Board			L Change	Addition		
NAME						1.2 NAM	E		Dav	id Clark						
SIRSET	SIGNET ADDRESS S. COLLEGE AVE. NEWTON NC 28658				1.3		1.3 STREET ADDRESS .		ρ.υ.	Box 488	114					
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NAME	ANTAN OPOTONI PO							3.3 STREET ADDRESS		by Sanford Auburn	St.					
1	STREE* ACCRESS TUDAR CROTON RU OTTY-ST-ZIP JOHNSTON OH								× 30) And]:	770/	_			
TILLE	DV	01011			☐ DELETE	3.4. City 4.1 Title		- 211		ham, No. C.	arollna o	7704	Change	Addition		
NAME		RE, JO	I. NHC		4.2									7		
1	I	OX 48						4.3 STREET ADDRESS								
	TY-ST-ZIP DENVER NC							· ZIP								
TITLE	DV				DELETE	5.1 TITLE		-		 			Change	Addition		
NAMÉ	BING	IAM. J.	. Hugh		5.2			5.2 NAME								
STREET ADDRESS P.O. BOX 488 N/A					5.3		5.3 STREET ADDRESS									
CITY-5	DENI	ER NC			5.4 CITY - ST - ZIP											
1011	DV		1.784.		☐ DELETE	6.1 (1)	E				······································		Change	Addition		
NAME	'	ON, W	ALLIAM H			6.2 NAM	E									
STREET		3OX 48				6.3 STRE	ETA	ADDRESS								
CITY 5	ST ZIP DENV	ER NC	•			6.4 CITY										
14	do beceby certify	that the	information supp	olied with this	filing does not qua	lify for the e	xen	nption st	tated in	Section 119.07(3)	i), Florida Statut	es. I furthe	er certify tha	it the		
1 !	Lam an officer or d	lirector (of the corporation	i or the recei	ntal annual report is ver or trustee empo achment with an a	wered to ex	ecu	ate and ute this r	report a	s required by Chap	oter 607, Florida	Statutes; a	and that my	name ************************************		