

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90049 002 ***150.00

DOCUMENT # F94000004277

1. Entity Name
EXECUTIVE AIRLINES, INC.



Principal Place of Business
**4333 AMON CARTER BLVD., MD 5675
FORTH WORTH TX 76155**

Mailing Address
**4333 AMON CARTER BLVD., MD 5675
FORTH WORTH TX 76155**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **66-0433166**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	ARPEY, GERALD J	
STREET ADDRESS	4333 AMON CARTER BLVD., MD 5621	
CITY-ST-ZIP	FORTH WORTH TX 76155	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BOWLER, PETER M	
STREET ADDRESS	4333 AMON CARTER BLVD., MD 5475	
CITY-ST-ZIP	FORTH WORTH TX 76155	
TITLE	CEOD	<input type="checkbox"/> Delete
NAME	CARTY, DONALD J	
STREET ADDRESS	4333 AMON CARTER BLVD., MD 5624	
CITY-ST-ZIP	FORTH WORTH TX 76155	
TITLE	P	<input type="checkbox"/> Delete
NAME	HAZY, G. GEORGE	
STREET ADDRESS	P.O. BOX 38082	
CITY-ST-ZIP	SAN JAUN PR 00937-0082	
TITLE	VT	<input type="checkbox"/> Delete
NAME	BEER, JAMES A	
STREET ADDRESS	4333 AMON CARTER BLVD., MD 5566	
CITY-ST-ZIP	FORTH WORTH TX 76155	
TITLE	VGCS	<input type="checkbox"/> Delete
NAME	STROUD, HOLLY E	
STREET ADDRESS	4333 AMON CARTER BLVD., MD 5494	
CITY-ST-ZIP	FORTH WORTH TX 76155	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Charles D. Marlett**
Corporate Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/03
Date

817-967-6356
Daytime Phone #

CR2E034 (10/02)