

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

95

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FLORIDA DEPARTMENT OF STATE
SECRET, FLORIDA

DOCUMENT # F94000004701

1. Corporation Name

Air South, Inc. d/b/a Air South Airlines, Inc.

700001520607
-06/22/95--01049--016
****225.00 ****225.00

Principal Place of Business

1800 St. Julian Place
Columbia, SC 29204

Mailing Address

Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

October 3, 1994

4. FEI Number

36-3889681

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

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T Corporation System
1311 Executive Center Drive, Suite 200
Tallahassee, FL 32301

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: Typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME Haley, Clifton E.
STREET ADDRESS 1800 St. Julian Place
CITY-ST-ZIP Columbia, SC 29204

11 TITLE ☐ Change ☐ Addition

TITLE V
NAME Volz, Thomas J.
STREET ADDRESS 1800 St. Julian Place
CITY-ST-ZIP Columbia, SC 29204

12 NAME ☐ Change ☐ Addition

TITLE V
NAME Crosby, Dennis
STREET ADDRESS 1800 St. Julian Place
CITY-ST-ZIP Columbia, SC 29204

13 STREET ADDRESS ☐ Change ☐ Addition

TITLE V/T
NAME McConnaughey, George
STREET ADDRESS 1800 St. Julian Place
CITY-ST-ZIP Columbia, SC 29204

14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME Tootle, London
STREET ADDRESS 1800 St. Julian Place
CITY-ST-ZIP Columbia, SC 29204

15 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME Baker, Donald
STREET ADDRESS 1800 St. Julian Place
CITY-ST-ZIP Columbia, SC 29204

16 CITY-ST-ZIP ☐ Change ☐ Addition

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 110.07(3)(k), Florida Statutes. I further certify that the information included 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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald Baker, Secretary

6-8-95

(803)771-0038

ext. 3008