

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08911

FILED
Jul 09, 2007
Secretary of State

Entity Name: VIRGIN ATLANTIC AIRWAYS LIMITED

Current Principal Place of Business:

FINANCE ADMINISTRATION
747 BELDEN AVENUE
NORWALK, CT 06850 US

New Principal Place of Business:

FINANCE ADMINISTRATION
75 NORTH WATER STREET
SOUTH NORWALK, CT 06854 US

Current Mailing Address:

FINANCE ADMINISTRATION
747 BELDEN AVENUE
NORWALK, CT 06850 US

New Mailing Address:

FINANCE ADMINISTRATION
75 NORTH WATER STREET
SOUTH NORWALK, CT 06854 US

FEI Number: 13-3213123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BRANSON, RICHARD SIR
Address: RICHARDS' HOUSE NECKER ISLAND
City-St-Zip: THE VALLEY, VIRGIN GORDA,

Title: D () Delete
Name: RIDGWAY, STEPHEN
Address: 174 CASTLE STREET PORTCHESTR, WISTARIA COT
City-St-Zip: FAREHAM HAMPSHIRE, PO 1690

Title: D () Delete
Name: SOUTHERN, JULIE
Address: LOWER FROYLE, ALDERSEY HOUSE
City-St-Zip: ALTON HAMPSHIRE, GU344LLUK

Title: D () Delete
Name: FARROW, FRANCES
Address: 520 BROADWAY 4TH FLOOR
City-St-Zip: NEW YORK, NY 10012

Title: D () Delete
Name: STRAMBI, LYELL
Address: HOPHURST PLACE CRAWLEY DOWN WEST, SHAW COT
City-St-Zip: WEST SUSSEX, RH 104LNUK

Title: D () Delete
Name: DESOUSA, IAN
Address: 16 TIMBERLING GARDENS
City-St-Zip: SOUTH CROYDON, SURREY, CR 20AWUK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REGINA LINGIS

VP

07/09/2007

Electronic Signature of Signing Officer or Director

Date