

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09196

Entity Name: SWISSPORT FUELING INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

45025 AVIATION DRIVE, SUITE 350
DULLES, VA 20166 US

New Principal Place of Business:

45025 AVIATION DRIVE
SUITE 350
DULLES, VA 20166 US

Current Mailing Address:

45025 AVIATION DRIVE, SUITE 350
DULLES, VA 20166 US

New Mailing Address:

45025 AVIATION DRIVE
SUITE 350
DULLES, VA 20166 US

FEI Number: 54-0642003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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:

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COMEAU, THOMAS . F
Address: 45025 AVIATION DR, STE 350
City-St-Zip: DULLES, VA 20166

Title: V () Delete
Name: ESTRELLA, EARL L
Address: 45025 AVIATION DR, STE 350
City-St-Zip: DULLES, VA 20166

Title: V () Delete
Name: KEOUGH, JAMES F
Address: 45025 AVIATION DR., STE 350
City-St-Zip: DULLES, VA 20166

Title: V () Delete
Name: BONNEVIER, JOSEPH G
Address: 45025 AVIATION DR, STE 350
City-St-Zip: DULLES, VA 20166

Title: T () Delete
Name: MILNER, LINDY
Address: 45025 AVIATION DR, STE 350
City-St-Zip: DULLES, VA 20166

Title: VD () Delete
Name: BODENMANN, ERICH
Address: 45025 AVIATION DR STE 350
City-St-Zip: DULLES, VA 20166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GARCIA, PEGGY
Address: 45025 AVIATION DR., STE 350
City-St-Zip: DULLES, VA 20166

Title: () Change () Addition
Name:
Address:
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 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: LINDY MILNER

T

04/23/2007

Electronic Signature of Signing Officer or Director

Date