

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09196

FILED  
Apr 07, 2010  
Secretary of State

Entity Name: SWISSPORT FUELING INC.

**Current Principal Place of Business:**

45025 AVIATION DRIVE  
SUITE 350  
DULLES, VA 20166 US

**New Principal Place of Business:**

**Current Mailing Address:**

45025 AVIATION DRIVE  
SUITE 350  
DULLES, VA 20166 US

**New Mailing Address:**

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 HAYS STREET  
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S  
Name: OAKLEY, DAWN E  
Address: 45025 AVIATION DR, STE 350  
City-St-Zip: DULLES, VA 20166

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

Title: EVPD  
Name: BRUYGOM, RICHARD VAN  
Address: 45025 AVIATION DR., STE 350  
City-St-Zip: DULLES, VA 20166

Title: PD  
Name: STANLEY, LIVINGSTON A  
Address: 45025 AVIATION DR, STE 350  
City-St-Zip: DULLES, VA 20166

Title: TD  
Name: HAYDEN, BRUCE C  
Address: 45025 AVIATION DR, STE 350  
City-St-Zip: DULLES, VA 20166

I hereby 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 all other like empowered.

SIGNATURE: BRUCE C HAYDEN

TD

04/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date