2000 UNIFORM BUSINESS REPORT (UBR)

May 03, 2000 8:00 am Secretary of State **DOCUMENT # P10250** 1. Entity Name AMERICAN TRANS AIR, INC. 05-03-2000 90041 019 ***150.00 Principal Place of Business Mailing Address 7337 W. WASHINGTON STREET P O BOX 51609 INDIANAPOLIS IN 46231 INDIANAPOLIS IN 46251-0609 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 35-1305077 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change Addition TITLE 连连直接用 ☐ Delete TITLE WOLFF, KENNETH K NAME NAME 7337 W WASHINGTON ST STREET ADDRESS STREET ADDRESS INDIANAPOLIS IN CITY-ST-ZIP CITY-ST-ZIP VC00 Addition ☐ Change ☐ Delete TITLE TITLE HLAVACEK, JAMES W. NAME NAME 7337 W WASHINGTON ST STREET ADDRESS STREET ADDRESS INDIANAPOLIS IN CITY-ST-ZIP CITY-ST-ZIP V\$ Change ☐ Addition ☐ Delete TITLE TITLE HUNT, BRIAN T. NAME 7337 W WASHINGTON ST STREET ADDRESS STREET ADDRESS INDIANAPOLIS IN CITY-ST-ZIP CITY-ST-ZIP ☐ Addition CD ☐ Delete TITLE ☐ Change TITLE MIKELSONS, GEORGE J NAME NAMÉ 7337 W. WASHINGTON STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN **PCEO** ☐ Delete ☐ Change ☐ Addition TITLE TITLE TAGUE, JOHN P. NAME NAME 7337 W. WASHINGTON ST STREET ADDRESS STREET ADDRESS INDIANAPOLIS IN 46231 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Brian T. Hunt شنه المستوادية

4/20/00

Date

317/240-7006

Daytime Phone #