FILED 2001 UNIFORM BUSINESS REPORT (UBR) Feb 28, 2001 8:00 am **DOCUMENT # P10250 Secretary of State** 1. Entity Name AMERICAN TRANS AIR, INC. 02-28-2001 90021 026 ***150.00 Principal Place of Business Mailing Address 7337 W. WASHINGTON STREET P O BOX 51609 Indianapolis in 46231 INDIANAPOLIS IN 46251-0140 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 35-1305077 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 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 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 DATE 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 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE Change Addition TITLE Delete NAME WOLFF, KENNETH K NAME STREET ADDRESS STREET ADDRESS 7337 W WASHINGTON ST CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN VC00 TITLE Change Addition TITLE ☐ Delete HLAVACEK, JAMES W. NAME NAME STREET ADDRESS STREET ADDRESS 7337 W WASHINGTON ST CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN ٧S ☐ Delete Change ☐ Addition TITLE TITLE HUNT, BRIAN T. NAME NAME STREET ADDRESS STREET ADDRESS 7337 W WASHINGTON ST CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN Change ☐ Addition TITLE CD ☐ Delete TITLE MIKELSONS, GEORGE J NAME NAME STREET ADDRESS STREET ADDRESS 7337 W. WASHINGTON STREET CITY-ST-7IP CITY-ST-ZIP indianapolis in TITLE **PCEO** ☐ Delete TITLE Change ☐ Addition NAME TAGUE, JOHN P. NAME STREET ADDRESS STREET ADDRESS 7337 W. WASHINGTON ST CITY-ST-ZIP CITY-ST-ZIP INDIANAPOLIS IN 46231 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing 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 amaddress, with all other like empowered.

SIGNATURE:

Den T. Krust

SEMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brian T. Hunt

2/22/01

317/240-7006

Date

Daytime Phone #