FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90812 026 ***150.00

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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P14427 **DOCUMENT #**

1. Entity Name
PIEDMONT AIRLINES, INC.

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Principal Place of Business SALISBURY WICOMICO COUNTY AIRPORT SALISBURY MD 21804			5443	Mailing Address 5443 AIRPORT TERMINAL RD SALISBURY MD 21804 US							
2. Principal Place of Business		3. Mailing Address					A TOBETOORY TOU ELEVIS BEART BEARD EXTENDED AND A CHARLES	ABAY BABAY BABAY BAB	LAR BIOGRA ASOR		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				7	☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4.	4. FEI Number 52-0970090 Applied For Not Applicable				
Zip	Country			Zip Count			5.	5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name	and Address of Current	Register	Registered Agent			7. 1	7. Name and Address of New Registered Agent			
						Name					
CT CORPO	Dration S	YSTEM				Street Address	e (PO B	(P.O. Box Number is Not Acceptable)			
1200 S. Pl	ne island	ROAD				Street Address	55 (1 .O. 1.	(1.0. box Number is Not Acceptable)			
PLANTATI(ON FL 3332	24									
						City		FI	Zip Code	=	
			or the purp	ose of changing its	registere	ed office or regis	tered ag	gent, or both, in the State of Florida. I am	familiar with, a	and accept	
the obligat	ions of regist	ered agent.								}	
SIGNATURE .	Signature typed	or printed name of registered agen	and title if and	MOTI	F Registerer	d Agent signature requ	ired when re	einstating) DATE			
'				(10.1				T			
۲.	-	FEE IS \$150.00						9. Election Campaign Financing	\$5.0	O May Be	
		03 Fee will be \$550.00 o Florida Department o]				Trust Fund Contribution.		to Fees	
	· rayable ii	OFFICERS AND		DC .	111.			L DDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS	2 (6) 11	
TITLE	D	OFFICERS AND	DIRECTO	☐ Delete	TITLE		AL	DDITIONS/CHANGES TO OFFICERS AN	☐ Change	Addition	
NAME	LEONARD,	JOHN F.		□ Delete	NAME				[_] Ghange	Audition	
STREET ADDRESS	427 14TH ST 303M			STRE	ET ADDRESS				\		
CITY-ST-ZIP	OCEAN CITY MD 21842			CITY-S		-ST-ZIP				}	
TITLE	V			Delete	TITLE				☐ Change	Addition	
	FARROW, STEVEN R.				NAME	E				1	
STREET ADDRESS	3 NICHOLAS MEWS					ET ADDRESS				ĺ	
CITY-ST-ZIP	SALISBURY MD				CITY	-ST-ZIP					
TITLE .	S			Delete	TITLE	.		-	Change	Addition	
NAME		, JENNIFER			NAMÉ						
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS ST-ZIP				j	
	ARLINGTO	N VA									
TITLE NAME	dof Adkins, L	VMM C		Delete	TITLE	j			☐ Change	☐ Addition	
		NNELLY MILL				ET ADDRESS					
CITY-ST-ZIP	DELMAR M					-ST-ZIP				1	
TITLE	C	<u> </u>		☐ Delete	TITLE	: -			☐ Change	Addition	
	TIMMONS,	WILLIAM		— D 5000	NAME						
	1502A SH				STREE	ET ADDRESS				}	
CITY-ST-ZIP	SALISBUR	Y MD 21804			CITY-	-ST-ZIP					
TITLE				☐ Delete	TITLE				☐ Change	Addition	
NAME					NAME	E [
STREET ADDRESS	1					ET ADDRESS					
CITY-ST-ZIP	L					-ST-ZIP					
12. I hereby of indicated	ertify that the	e information supplied wit	h this filing	does not qualify for	r the exer	mption stated in	Section	119.07(3)(i), Florida Statutes. I further ce legal effect as if made under path; that I	rtify that the in	or director	

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/03

410-742-2996

Daytime Phone #