

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 01, 2001 8:00 am**  
**Secretary of State**  
 08-01-2001 90010 036 \*\*\*550.00

0131203 AT

**DOCUMENT # P98000012144**  
 1. Entity Name  
**AA ADVANCE AIR, INC.**

Principal Place of Business  
**1920 NW 32ND STREET  
 POMPANO BEACH FL 33064**

Mailing Address  
**36 GREENWAY PLAZA  
 STE 1500 2000  
 HOUSTON TX 77046**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
**36 Greenway Plaza**  
 Suite, Apt. #, etc.  
**Suite 2000**  
 City & State  
**Houston**  
 Zip Country  
**TX 77046**

4. FEI Number **65-0856101** Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>LUKE, DONALD L</b> <b>8 GREENWAY PLAZA, STE 1500</b> <b>HOUSTON TX 77046</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ROACH, ALFRED R JR</b> <b>8 GREENWAY PLAZA, STE 1500</b> <b>HOUSTON TX 77046</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BURROW, ROBERT</b> <b>1920 NW 32ND STREET</b> <b>POMPANO BEACH FL 33064</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VS</b> <b>BRYANT, RANDOLPH W</b> <b>8 GREENWAY PLAZA, STE 1500</b> <b>HOUSTON TX 77046</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>BURROW, CAROL</b> <b>1920 NW 32ND STREET</b> <b>POMPANO BEACH FL 33064</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT</b> <b>MILLER, DARREN B</b> <b>8 GREENWAY PLAZA, SUITE 1500</b> <b>HOUSTON TX 77046-0892</b>	<input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Larry P. Holland</b> <b>36 Greenway Plaza, Suite 2000</b> <b>Houston, Tx 77046</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>Robert Tyler</b> <b>36 Greenway Plaza, Suite 2000</b> <b>Houston, Tx 77046</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VS</b> <b>Gray H. Muzzy</b> <b>36 Greenway Plaza, Suite 2000</b> <b>Houston, Tx 77046</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT</b> <b>Todd A. Matherne</b> <b>36 Greenway Plaza, Suite 2000</b> <b>Houston, Tx 77046</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 an address, with all other like empowered.

SIGNATURE: Gray H. Muzzy **Gray H. Muzzy**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date **7/20/01** Daytime Phone # **713-860-0100**

CR2E034 (5/01)