

1.) CORPORATION NAME:

AAR Aircraft Services, Inc.

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CTR 16TH FLR
1111 E MAIN ST**

SCC ID NO: **F1883802**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O ROBERT J REGAN
1100 N WOOD DALE RD

CITY/ST/ZIP: WOOD DALE, IL 60191

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	TIMOTHY ROMENESKO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1100 N WOOD DALE RD		
CITY/ST/ZIP/CO:	WOOD DALE, IL 60191		

NAME:	ROBERT REGAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 N WOOD DALE RD		
CITY/ST/ZIP/CO:	WOOD DALE, IL 60191		

NAME:	BRIAN LOOMER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5300 NW 36 ST BLDG 850		
CITY/ST/ZIP/CO:	MIAMI, FL 33166		

NAME:	DAVID STORCH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1100 N WOOD DALE RD		
CITY/ST/ZIP/CO:	WOOD DALE, IL 60191		

NAME:	Dany Kleiman	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 N. Wood Dale Road		
CITY/ST/ZIP/CO:	Wood Dale, IL 60191		

NAME:	Danny Martinez	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2825 West Perimeter Road		
CITY/ST/ZIP/CO:	Indianapolis, IN 46241		

NAME: Robert J. Regan TITLE: SECRETARY ADDRESS: 1100 N. Wood Dale Road CITY/ST/ZIP/CO: Wood Dale, IL 60191	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Donald J. Vilim TITLE: ASST SECRETARY ADDRESS: 1100 N. Wood Dale Road CITY/ST/ZIP/CO: Wood Dale, VA 60191	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Jennifer P. Griffin TITLE: ASST SECRETARY ADDRESS: 1100 N. Wood Dale Road CITY/ST/ZIP/CO: Wood Dale, VA 60191	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Michael K. Carr TITLE: ASST TREASURER ADDRESS: 1100 N. Wood Dale Road CITY/ST/ZIP/CO: Wood Dale, IL 60191	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Robert J.Regan	Robert J.Regan,	12/17/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.