2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# L00000015353

Entity Name: AVION AIR ACADEMY, L.L.C.

Current Principal Place of Business:

2841 FLIGHTLINE AVENUE
SANFORD, FL 33773

New Principal Place of Business:

Current Mailing Address:

2841 FLIGHTLINE AVENUE
SANFORD, FL 33773

New Mailing Address:

FEI Number: 59-3720855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAY, N. DWAYNE JR ESQ
GREENSPOON, MARDER, ET AL
135 W. CENTRAL BLVD., STE. 1100
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	FLY BY THE SEAT, L.L, .C.	
Address:	2100 COUNTRY CLUB ROAD	
City-St-Zip:	SANFORD, FL 32771	
Title:	MGR	( ) Delete
Name:	GRAY, N. DWAYNE JR	
Address:	135 W CENTRAL BLVD SUITE 1100	
City-St-Zip:	ORLANDO, FL 32801	
Title:	MGR	( ) Delete
Name:	SCHLATER, JOHN	
Address:	615 COPELAND MILL RD	
City-St-Zip:	WESTERVILLE, OH 43081	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN SCHLATER MGR 04/27/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date