

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000384

FILED
Jun 22, 2006
Secretary of State

Entity Name: COVENANT AVIATION SECURITY, LLC

Current Principal Place of Business:

270 REMINGTON BLVD
SUITE B
BOLINGBROOK, IL 60440

New Principal Place of Business:

Current Mailing Address:

270 REMINGTON BLVD
SUITE B
BOLINGBROOK, IL 60440

New Mailing Address:

FEI Number: 35-2161799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: MAUREEN CULLEN/ ASSISTANT VICE PRESIDENT

06/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COE, ROBERT L
Address: 270 REMINGTON BLVD, SUITE B
City-St-Zip: BOLINGBROOK, IL 60440

Title: MGR () Delete
Name: JACOBSON, JAMES D
Address: 55 W. MONROE STREET, SUITE 3500
City-St-Zip: CHICAGO, IL 60603

ADDITIONS/CHANGES:

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 Chapter 119, 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: ROBERT COE

MGR

06/22/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date