

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000101082

**Entity Name:** COTTON STRIP AIRPORT ASSOCIATION, L.L.C.

**Current Principal Place of Business:**

6118 STATE ROAD 80 WEST  
LABELLE, FL 33935

**Current Mailing Address:**

6118 STATE ROAD 80 WEST  
LABELLE, FL 33935

**FEI Number: 90-0310284**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SHULTS, MICHAEL LEO  
6118 STATE RD 80 W  
LABELLE, FL 33935 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MEMB
Name	SHULTS, MICHAEL LEO	Name	ELAM-SHULTS, BETHENY
Address	6118 SR 80 W	Address	6118 SR 80 W
City-State-Zip:	LABELLE FL 33935	City-State-Zip:	LABELLE FL 33935

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BETHENY ELAM-SHULTS**

**MEMB**

**04/12/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date