#### **2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000047157

Entity Name: JM AVIATION, LLC

Apr 27, 2020 Secretary of State 7668534884CC

**FILED** 

# **Current Principal Place of Business:**

511 NW 48TH TERRACE OCALA, FL 34482

## **Current Mailing Address:**

511 NW 48TH TERRACE OCALA, FL 34482 US

FEI Number: 27-2504205 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MOORE, TRUDI 511 NW 48TH TERRACE OCALA, FL 34482 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

Title

MGR

Date

## Authorized Person(s) Detail:

Title MGR

NameMOORE, MICHAEL JNameMCLAUGHLIN, PATAddress511 NW 48TH TERRACEAddress1268 N. CIRCLE DRIVE

City-State-Zip: OCALA FL 34482 City-State-Zip: CRYSTAL RIVER FL 34429

Title MGR

Name SCHOELER, JEFFREY

Address PO BOX 1418
City-State-Zip: OCALA FL 34478

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: MICHAEL J. MOORE

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

04/27/2020