## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000189557

Entity Name: HARTER AEROSPACE, LLC

**Current Principal Place of Business:** 

401 W. GEMINI DRIVE TEMPE. AZ 85283

**Current Mailing Address:** 

3000 TAFT STREET HOLLYWOOD, FL 33021

FEI Number: 47-2458702 Certificate of Status Desired: Yes

Name and Address of Current 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:

Electronic Signature of Registered Agent

Date

FILED Mar 04, 2015

**Secretary of State** 

CC5785816862

Authorized Person(s) Detail :

Title AMBR Title VF

Name HARTER INDUSTRIES, INC. Name HINSKI, WILLIAM

Address 401 W. GEMINI DRIVE Address 401 W. GEMINI DRIVE

City-State-Zip: TEMPE AZ 85283 City-State-Zip: TEMPE AZ 85283

Title DIRECTOR, TREASURER Title **AMBR** Name MACAU, CARLOS L JR. HFSC III CORP Name Address 3000 TAFT STREET Address 3000 TAFT STREET HOLLYWOOD FL 33021 City-State-Zip: City-State-Zip: HOLLYWOOD FL 33021

TitleDIRECTORTitleDIRECTORNameMENDELSON, ERICNameMORELL, LUIS JAddress3000 TAFT STREETAddress3000 TAFT STREET

City-State-Zip: HOLLYWOOD FL 33021 City-State-Zip: HOLLYWOOD FL 33021

Title VP Title SECRETARY

Name KOLLETT, GLENN Name LETENDRE, ELIZABETH R

Address 401 W. GEMINI DRIVE Address 3000 TAFT STREET

City-State-Zip: TEMPE AZ 85283 City-State-Zip: HOLLYWOOD FL 33021

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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: VALERIE LIU SENIOR ACCOUNTANT 03/04/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

## **Authorized Person(s) Detail Continued:**

Title VP

Name BIEDERWOLF, JEFF
Address 3000 TAFT STREET

City-State-Zip: HOLLYWOOD FL 33021