

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000998

Entity Name: AEROPARTNERS, LLC

FILED
Jul 12, 2005
Secretary of State

Current Principal Place of Business:

4615 N. HALE AVENUE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14157
TAMPA, FL 33690

New Mailing Address:

FEI Number: 59-3621364 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:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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/MANAGERS:

Title: MGRM () Delete
Name: FERNANDEZ, PETER J
Address: 11702 WESSON CIRCLE WEST
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: WHITE, RONALD A
Address: 4918 WEST BAYWAY PLACE
City-St-Zip: TAMPA, FL 33629

Title: MGRM () Delete
Name: SKYSTONE, LP,
Address: 1910 NE 30TH AVE.
City-St-Zip: PORTLAND, OR 97212

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: PETER FERNANDEZ

MGRM

07/12/2005

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