

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000010635

1. Entity Name

ORANGE AIRWAYS, L.L.C.

FILED

01 APR -9 AM 7:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

10151 DEERWOOD PARK BLVD
BLDG 100 SUITE 410
JACKSONVILLE FL 32256

Mailing Address

10151 DEERWOOD PARK BLVD
BLDG 100 SUITE 410
JACKSONVILLE FL 32256



2. Principal Place of Business

3. Mailing Address

100 CESSNA Blvd

Suite, Apt. #, etc.

Unit #1

Suite, Apt. #, etc.

City & State

Daytona Bch, FL 32124

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2266757

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KOEGLER, STEVEN C ESQ
10151 DEERWOOD PARK BLVD
BLDG 100 SUITE 410
JACKSONVILLE FL 32256

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE mem.
NAME Itera Intl. Energy Corp.
STREET ADDRESS 10151 DEERWOOD PARK BLVD.
CITY-ST-ZIP Bldg 100, Ste 410 Jacksonville, FL 32256

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE mem.
NAME Intl. Aviation Management Group, Inc.
STREET ADDRESS 100 Spruce Creek Blvd, Ste 1
CITY-ST-ZIP DAYTONA Bch, FL 32124

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

Steven C. Koegler

STEVEN C. KOEGLER

4/3/01

904-996-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)