2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2004
Secretary of State

DOCUMENT# L00000011540

Entity Name: BOUNTY AIR LEASING, LLC

Current Principal Place of Business:

121 ALHAMBRA PLAZA, PH I, STE. 1600
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

121 ALHAMBRA PLAZA, PH I, STE. 1600
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, W. ALLEN
121 ALHAMBRA PLAZA, PH 1, SUITE 1600
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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	MORRIS, W. ALLEN	
Address:	121 ALHAMBRA PLAZA, PH I, SUITE 1600	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	MGR	( ) Delete
Name:	MORRIS, DIANE Y	
Address:	121 ALHAMBRA PLAZA, PH I, SUITE 1600	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	MGR	( ) Delete
Name:	GRAHAM, DALE I	
Address:	121 ALHAMBRA PLAZA, PH , SUITE 1600	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	MGR	( ) Delete
Name:	HUNTER, ROBERT M	
Address:	121 ALHAMBRA PLAZA, PH I, SUITE 1600	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	MGR	( ) Delete
Name:	RENTZ, R. LARRY	
Address:	121 ALHAMBRA PLAZA, PH I, SUITE 1600	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGR	( ) Change (X) Addition
Name:	GIL, YAZMIN	
Address:	121 ALHAMBRA PLAZA, PH I, SUITE 1600	
City-St-Zip:	CORAL GABLES, FL 33134	

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: ROBERT M. HUNTER S 01/14/2004

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