


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90039 001 ****55.00

DOCUMENT # L00000013992 1. Entity Name SOUTHERN JET CENTER, L.L.C.	
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Principal Place of Business 2841 FLIGHTLINE AVE SANFORD, FL 32773	Mailing Address 2841 FLIGHTLINE AVE SANFORD, FL 32773
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DO NOT WRITE IN THIS SPACE

04202006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3681952	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WATKINS, JAMES A
206 E SOUTH STREET
ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WATKINS, JAMES A 1300 E. 26TH PLACE SANFORD, FL 32773
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *X*  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date _____ Daytime Phone # _____