2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2002 8:00 am
Secretary of State
05-06-2002 90190 046 ****50.00

DOCUMENT # L00000016014

1. Entity Name
AEROQUEST, LLC

Principal Place of Business	Mailing Address
9000 SEMINOLE BLVD SEMINOLE FL 33772	9000 SEMINOLE BLVD SEMINOLE FL 33772

[redacted]

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 593737779 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AHLQUIST, BRYAN 9000 SEMINOLE BLVD SEMINOLE FL 33772	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. ADDITIONS/CHANGES TO MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGER BRYAN AHLQUIST 5340 DENVER ST. N.E ST. PETE FL 33703	☐ Delete	(A)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER GEORGE BORTNYK 13938 85th TERRACE N. SEMINOLE, FL 33776	☐ Delete	(B)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER JOE DELEON 5991 36th AVE N. ST. PETE, FL 33710	☐ Delete	(C)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER TOM EVANS P.O. BOX 31804 TAMPA FL 33631	☐ Delete	(D)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER GREG HEMBREE 2405 PARKSTREAM AVE CLEARWATER, FL 33759	☐ Delete	(E)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER JIM LEATHERS 2830 VALENCIA LANE W. PALM HARBOR, FL 34684	☐ Delete	(F)

10. ADDITIONS/CHANGES

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER BRINTON RITDELWAY 2820 LANDOVER DR CLEARWATER, FL 34621	☐ Change	(A) Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEMBER WAYNE WITT 7906 FLOWERFIELD DR. TAMPA, FL 33615	☐ Change	(B) Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CURRENT LIST OF ALL MEMBERS	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition

CR2E083 (9/01)

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: SIGNATURE REQUIRED MANAGER 1/7/02 727 391 4244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #