

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000016014

FILED
May 01, 2004
Secretary of State

Entity Name: AEROQUEST, LLC

Current Principal Place of Business:

9000 SEMINOLE BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

9000 SEMINOLE BLVD
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-3737779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHLQUIST, BRYAN
9000 SEMINOLE BLVD
SEMINOLE, FL 33772

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: ANLQUIST, BRYAN
Address: 5240 DENVER ST NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: MGR () Delete
Name: BORTNYK, GEORGE
Address: 13938 85TH TERRACE N
City-St-Zip: SEMINOLE, FL 33776

Title: MGR () Delete
Name: DELEON, JOE
Address: 5991 36TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: MGR () Delete
Name: EVANS, TOM
Address: P.O. BOX 31806
City-St-Zip: TAMPA, FL 33631

Title: MGR () Delete
Name: HEMBREE, GREG
Address: 2405 PARKSTREAM AVE
City-St-Zip: CLEARWATER, FL 33759

Title: MGR () Delete
Name: LEATHERS, JIM
Address: 2820 VALENCIA LANE W
City-St-Zip: PALM HARBOR, FL 34684

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
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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: GREGORY J HEMBREE

MGR

05/01/2004

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