2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000001006

1. Entity Name

AVION AIRCRAFT SALES, L.L.C.

FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business 2841 FLIGHTLINE AVENUE

SANFORD, FL 32773

Mailing Address

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DO NOT WRITE IN THIS SPACE

2841 FLIGHTLINE AVENUE SANFORD, FL 32773



04252006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3751644 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

GRAY, N. DWAYNE JR ESQ 201 E PINE ST STE 500 ORLANDO, FL 32801

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	above named entity submits this statement for the purpose of chan obligations of registered agent.	ging its registered office or registered agent, or t	ooth, in the State of Florida.	I am familiar with, and accep
SIGNA'	rure			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	l	DATE

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

9.	9. MANAGING MĒMBĒRS/MANAĢĒRS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FLY BY THE SEAT, L.L.C. 2100 COUNTRY CLUB RD. SANFORD, FL 32771	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGR GRAY, N. DWAYNE JR 201 E PINE ST #500 ORLANDO, FL 32801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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05/13/06-e0055-014 50.00

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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.

N. DWAYNE GRAY, JA MANAGER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE