2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L01000001006 1. Entity Name AVION AIRCRAFT SALES, L.L.C. Principal Place of Business Mailing Address 2841 FLIGHTLINE AVENUE 2841 FLIGHTLINE AVENUE SANFORD, FL 32773 SANFORD, FL 32773 DO NOT WRITE IN THIS SPACE

FILED Apr 02, 2007 8:00 am Secretary of State

04-02-2007 90440 003 ****50.00



03092007 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 59-3751644 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

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

SIGNATURE:

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_	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
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 CITY-ST-ZIP	MGR GRAY, N. DWAYNE JR 201 E PINE ST #500 ORLANDO, FL 32801		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	OT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN TH	IS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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.			

MADWAYNE