

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90127 038 ****55.00

DOCUMENT # L01000001974

1. Entity Name

ECHO LEASING, L.L.C.

Principal Place of Business

**561 PEARL HARBOR DRIVE
 DAYTONA BEACH FL 32114**

Mailing Address

**561 PEARL HARBOR DRIVE
 DAYTONA BEACH FL 32114**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

VOLUSIA

Zip

Country

VOLUSIA

4. FEI Number

59-3697780

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

**FULLER, DAVID D JR.
 630 N. WILD OLIVE AVENUE, SUITE A
 DAYTONA BEACH FL 32118**

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

Richard T. Russell
 Signature, typed or printed name of registered agent and title if applicable.

**MANAGING MEMBER - MANAGER
 MEMBER - MANAGING DIRECTOR**

1-10-02

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MANAGING MEMBER** ☐ Delete
 NAME **DAYTONA AIRCRAFT LEASING, INC**
 STREET ADDRESS **561 PEARL HARBOR DRIVE**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE **PRESIDENT** ☐ Change ☐ Addition
 NAME **DAYTONA AIRCRAFT LEASING, INC**
 STREET ADDRESS **RICHARD T. TRUSSELL**
 CITY-ST-ZIP **59-3423294**

TITLE **MANAGER & AUTHORIZED** ☐ Delete
 NAME **RICHARD T. TRUSSELL SIGNED**
 STREET ADDRESS **561 PEARL HARBOR DRIVE**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Richard T. Russell
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1-10-02
 DATE

CR2E083 (9/01)