L01000016286

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000016286

1. Entity Name

AVION JET CENTER, L.L.C.

FILED
02 APR 29 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2841 Flightline Avenue	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sanford, Florida	City & State: Same
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 286-44-3810 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: N. Dwayne Gray, Jr.

Street Address (P.O. Box Number is Not Acceptable): Greenspoon, Marder, et. al.

135 W. Central Blvd., Suite 1100

City: Orlando FL Zip Code: 32801

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: N. Dwayne Gray, Jr. DATE: 4-26-02
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

000005369890--8

9. MANAGING MEMBERS / MANAGERS

TITLE	MGR	TITLE	
NAME	Michael Gilardi	NAME	
STREET ADDRESS	2100 Country Club Road	STREET ADDRESS	
CITY-ST-ZIP	Sanford, Florida 32771	CITY-ST-ZIP	
TITLE	MGR	TITLE	
NAME	John Schlater	NAME	
STREET ADDRESS	615 Copeland Mill Road	STREET ADDRESS	
CITY-ST-ZIP	Westerville, Ohio 43081	CITY-ST-ZIP	
TITLE	MGR	TITLE	
NAME	N. Dwayne Gray, Jr.	NAME	
STREET ADDRESS	135 W. Central Blvd., Suite 1100	STREET ADDRESS	
CITY-ST-ZIP	Orlando, Florida 32801	CITY-ST-ZIP	DO NOT WRITE
TITLE		TITLE	IN THIS SPACE
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	BK
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E083B (12/01)

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: N. Dwayne Gray, Jr. MANAGER 4/24/02 (407) 425-6559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

L01000016286

ACCOUNT NO. : 072100000032

REFERENCE : 553444 5011958

AUTHORIZATION :

COST LIMIT : $ 55.00

Patricia Pruitt

ORDER DATE : April 29, 2002

ORDER TIME : 12:06 PM

ORDER NO. : 553444-190

CUSTOMER NO: 5011958

CUSTOMER: Anne Winsor, Legal Assistant
Greenspoon Marder Hirschfeld
135 West Central Blvd Ste 1100
South Trust Bank Building
Orlando, FL 32801

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: AVION JET CENTER, L.L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

BK

CONTACT PERSON: Janna Wilson-EXT#1155

EXAMINER'S INITIALS: _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA