

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025283

Entity Name: SHIEL AVIATION, LLC

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

6900 SE GOLFHOUSE ROAD
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

6900 SE GOLFHOUSE ROAD
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 56-2295555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT, ABRAHAM, REITER & MCCORMICK, P.A.
50 NORTH LAURA STREET, SUITE 2750
JACKSONVILLE, FL 32202 US

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/MANAGERS:

Title: MGRM () Delete
Name: SHIEL, HELEN M
Address: 6900 SE GOLFHOUSE DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: SMITH, THOMAS A
Address: 96 NE 4TH AVE.
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, 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: WILLIAM P. BRANT

MGR

01/14/2009

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