


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90045 036 ****55.00

DOCUMENT # L02000026757

1. Entity Name
ASPEN HELICOPTERS, LLC



Principal Place of Business
**C/O DAVID G. BUDD
3033 RIVIERA DRIVE, SUITE #201
NAPLES, FL 34103**

Mailing Address
**C/O DAVID G. BUDD
3033 RIVIERA DRIVE, SUITE #201
NAPLES, FL 34103**

40088763

2. Principal Place of Business - No P.O. Box #
5551 Ridgewood Drive

3. Mailing Address
c/o David G. Budd

Suite, Apt. #, etc.
Suite 501

Suite, Apt. #, etc.
5551 Ridgewood Dr., #501

City & State
Naples, FL

City & State
Naples, FL

Zip
34108

Country
USA

Zip
34108

Country
USA

04262007 Chg-LLC CR2E083 (12/06)

4. FEI Number
22-3884361

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
BUDD, DAVID G 3033 RIVIERA DRIVE, SUITE #201 NAPLES, FL 34103	Name BUDD, DAVID G
	Street Address (P.O. Box Number is Not Acceptable) 5551 Ridgewood Drive, Suite 501
	City Naples FL Zip Code 34108

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 *David G. Budd* **David G. Budd, Registered Agent** **4/27/08**

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	Make check payable to Florida Department of State
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9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS/CHANGES	
TITLE MGRT	<input type="checkbox"/> Delete	TITLE MGRT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STARMAN, SHELDON W		NAME STARMAN, SHELDON W	
STREET ADDRESS 4099 TAMIAAMI TR. NORTH, SUITE 400		STREET ADDRESS 4099 TAMIAAMI TR. NORTH, SUITE 400	
CITY-ST-ZIP NAPLES, FL 34103		CITY-ST-ZIP NAPLES, FL 34103	
TITLE MGRS	<input type="checkbox"/> Delete	TITLE MGRS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BUDD, DAVID G		NAME BUDD, DAVID G	
STREET ADDRESS 3033 RIVIERA DR., SUITE 201		STREET ADDRESS 5551 Ridgewood Drive, Suite 501	
CITY-ST-ZIP NAPLES, FL 34103		CITY-ST-ZIP Naples, FL 34108	
TITLE MGR	<input type="checkbox"/> Delete	TITLE MGR	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DAVIS, JULIA M		NAME DAVIS, JULIA M	
STREET ADDRESS 9201 W. OLYMPIC BLVD., SUITE 200		STREET ADDRESS 9201 W. OLYMPIC BLVD., SUITE 200	
CITY-ST-ZIP BEVERLY HILLS, CA 90212		CITY-ST-ZIP BEVERLY HILLS, CA 90212	
TITLE AS	<input type="checkbox"/> Delete	TITLE AS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LAPIN, DAVID A		NAME LAPIN, DAVID A	
STREET ADDRESS 9201 W. OLYMPIC BLVD., SUITE 200		STREET ADDRESS 9201 W. OLYMPIC BLVD., SUITE 200	
CITY-ST-ZIP BEVERLY HILLS, CA 90212		CITY-ST-ZIP BEVERLY HILLS, CA 90212	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		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.

SIGNATURE: *David G. Budd* **4/27/07** **(239) 514-1000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

DAVID G. BUDD, ASSISTANT OPERATING MANAGER