

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

02-28-2003 90038 041 ****55.00

DOCUMENT # L02000028249

1. Entity Name

LIMA/LIMA AVIATION SERVICES, L.L.C.



Principal Place of Business

Mailing Address

114 NORTH TENNESSEE AVE. STE. 201
LAKELAND, FL 33801

PO BOX 8757
LAKELAND FL 33806-8757

2. Principal Place of Business

3. Mailing Address

PO Box: 8832

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Lakeland, FL

4. FEI Number

30-0122699

Applied For

Not Applicable

Zip

Country

Zip

33806

Country

Polk

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

HARWELL, CHRISTOPHER C

114 NORTH TENNESSEE AVE., STE. 201
LAKELAND FL 33801

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. 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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR**
NAME **HARWELL, CHRISTOPHER C**
STREET ADDRESS **114 NORTH TENNESSEE AVE, STE. 201**
CITY-ST-ZIP **LAKELAND FL 33801**

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10. ADDITIONS/CHANGES

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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 *Christopher C. Harwell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/21/2003

Date

Daytime Phone #

CR2E083 (10/02)