2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000000421

1. Entity Name SLS AVIATION, L.L.C

FILED Jan 10, 2006 08:00 AM Secretary of State

Principal Place of Business 12901 GOLF COURSE ROAD PARRISH, FL 34219 Mailing Address

12901 GOLF COURSE ROAD PARRISH, FL 34219



DO NOT WRITE IN THIS SPACE

01052006 No Chg-LLC CR2E08

CR2E083 (11/05)

4. FEI Number 20-0577878

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KAKLIS, WILLIAM ESQ. 1400 4TH AVENUE WEST BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE

		1	
	named entity submits this statement for the purpose of charling of registered agent.	nging its registered office or registered agent, or t	ooth, in the State of Florida. I am familiar with, and accept
SIGNATURE			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	lling Fee is \$50.00 ue by May 1, 2006	·	
9.	MANAGING MEMBERS/MANAGERS		The state of the s
TITLE NAME STREET ADDRESS	MGRM SARASOTA LAND SERVICES, INC. 4906 SR 46 EAST		
CITY-ST-ZIP	BRADENTON, FL 34208		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			/100000381232 01/11/06-80046-002 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DC	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE

11. I hereby certify that the information supplied with this filling 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: Wayne Undulil

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Wayne Underhill

1-6-06

941244-0511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #