

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005450

Entity Name: A & C AVIATION SERVICES, LLC

FILED  
Jan 05, 2009  
Secretary of State

**Current Principal Place of Business:**

740 AIRPORT ROAD  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

1 CREEK BEND WAY  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

1 CREEK BEND WAY  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 05-0562427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARKIN, MARSHALL H  
149 S. RIDGEWOOD AVENUE, SUITE 210  
DAYTONA BEACH, FL 32114 US

**Name and Address of New Registered Agent:**

WEITE, JAMES E  
1 CREEK BEND WAY  
ORMOND BEACH, FL 32174 US

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: JAMES E. WEITE

01/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEITE, JAMES E  
Address: 1 CREEK BEND WAY  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM ( ) Delete  
Name: ARRANTS, JACK C  
Address: 311 JOHN ANDERSON DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

**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: JAMES E. WEITE

MGRM

01/05/2009

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