

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018260

Entity Name: BAILEY AVIATION, LLC

**FILED**  
**Apr 30, 2004**  
**Secretary of State**

**Current Principal Place of Business:**

RT. 7, BOX 375  
LAKE CITY, FL 32055

**New Principal Place of Business:**

3526 E US HIGHWAY 90  
LAKE CITY, FL 32055

**Current Mailing Address:**

RT. 7, BOX 375  
LAKE CITY, FL 32055

**New Mailing Address:**

3526 E US HIGHWAY 90  
LAKE CITY, FL 32055

FEI Number: 27-0070715

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAILEY, SCOTT  
RT. 18, BOX 567  
LAKE CITY, FL 32025

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

BAILEY, SCOTT  
2240 SW SISTERS WELCOME RD  
APT.#102  
LAKE CITY, FL 32025

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:

04/30/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: BAILEY, SCOTT R  
Address: 2240 SW SISTERS WELCOME RD. APT#102  
City-St-Zip: LAKE CITY, FL 32025

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT R BAILEY

MGRM

04/30/2004

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