2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000035210

1. Entity Name

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

BURR & BURGE AVIATION, LLC



Principal Place of Business

100 WEST AIRPORT AVE. VENICE, FL 34285

Mailing Address

100 WEST AIRPORT AVE. VENICE, FL 34285

FILED Apr 26, 2005 8:00 am Secretary of State

04-26-2005 90020 009 ****50.00



DO NOT WRITE IN THIS SPACE

04182005 No Chg-LLC

CR2E083 (10/03)

	4	
68-0566934	1	Not Applicable
4. FEI Number		Applied For

5. Certificate of Status Desired

\$5.00 Additional Fee Required

44	
BURR, III, CARLL'S	
100 AIRPORT AVE.	
VENICE, FL 34285	

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of cha- ions of registered agent.	inging its registere	d office or registered agent, or both, in the S	state of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (Agent signature required when reinstating)	DATE
F	iling Fee Is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BURR, III, CARLL S 100 AIRPORT AVE. VENICE, FL 34285			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS — CITY-ST-ZIP			DO_NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE				

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.

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTA