2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024088

City-St-Zip:

Entity Name: GATOR AVIATION SERVICES, LLC

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3950 NE 48TH AVE 3950 NE 48TH AVE GAINESVILLE, FL 32609 GAINESVILLE, FL 32609 US **Current Mailing Address: New Mailing Address:** 3627 N.W. 33RD TERRACE 3950 NE 48TH AVENUE GAINESVILLE, FL 32605 GAINESVILLE, FL 32609 US FEI Number: 32-0117516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOMBERGER, CAROLYN L BOMBERGER, CAROLYN L 3627 N. W. 33RD TERRACE 2760 NW 26TH PLACE GAINESVILLE, FL 32605 GAINESVILLE, FL 32605 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: 04/27/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRP Title: MGRP () Delete (X) Change () Addition BOMBERGER, CAROLYN BOMBERGER, CAROLYN Name: Name: Address: 3627 NW 33RD TERR Address: 2760 NW 26TH PLACE City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605 US Title: Title: () Change (X) Addition () Delete Name: Name: BOMBERGER, MATTHEW A Address: Address: 8012 120TH PLACE, SE City-St-Zip: City-St-Zip: NEWCASTLE, WA 98056 US Title: () Delete Title: () Change (X) Addition BOMBERGER, RACHEL A Name: Name: 501 KNIGHTS RUN AVENUE, APT. 2211 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33602 US () Change (X) Addition Title: () Delete Title: Name: Name: BOMBERGER, CAROLYN L Address: Address: 2760 NW 26TH PLACE

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

GAINESVILLE, FL 32605 US

SIGNATURE: CAROLYN L. BOMBERGER MGRP 04/27/2006