

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024375

FILED
Apr 13, 2009
Secretary of State

Entity Name: CARIBBEAN AVIONICS SUPPLY, LLC

Current Principal Place of Business:

15895 78TH PLACE N.
LOXAHATCHEE, FL 33470

New Principal Place of Business:

5616 AVOCADO BLVD.
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

15895 78TH PLACE N.
LOXAHATCHEE, FL 33470

New Mailing Address:

5616 AVOCADO BLVD.
ROYAL PALM BEACH, FL 33411

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CRAVEN, TYSON S
15895 78TH PLACE N.
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

CRAVEN, TYSON S
5616 AVOCADO BLVD.
ROYAL PALM BEACH, FL 33411 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: _____

04/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CRAVEN, TYSON S
Address: 15895 78TH PLACE N.
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CRAVEN, TYSON S
Address: 5616 AVOCADO BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: TYSON S. CRAVEN

MGR

04/13/2009

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