

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031626

FILED
Jul 07, 2008
Secretary of State

Entity Name: MRS AIR LLC

Current Principal Place of Business:

8911 DANIELS PARKWAY
SUITE #3
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

1340 DEPOT STREET
SUITE 300
ROCKY RIVER, OH 44116 US

New Mailing Address:

FEI Number: 34-0183810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SHERMAN, DUANE M
8911 DANIELS PARKWAY
SUITE #3
FORT MYERS, FL 33912 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHERMAN, DUANE M
Address: 15730 PIPERS GLEN
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM () Delete
Name: SMITH, ROBB
Address: 15524 FIDDLESTICKS BLVD
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM () Delete
Name: RAY, STEVE
Address: 8381 GLENFINNAN CIRCLE
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGR () Delete
Name: KMETZ, MICHAEL J.
Address: 1340 DEPOT STREET, # 300
City-St-Zip: ROCKY RIVER, OH 44116

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL J. KMETZ

MGR

07/07/2008

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