

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 03, 2005 8:00 am
Secretary of State

01-31-2005 90197 017 ****50.00

JUUUU010



1st MOORE CR2E083 (10/04)

DOCUMENT # L04000033859					
1. Entity Name RIVER HOLDINGS AVIATION, LLC					
Principal Place of Business 1042 N. US HWY 1 ORMOND BEACH FL 32174			Mailing Address 1042 N. US HWY 1 ORMOND BEACH FL 32174		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-1080051	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BROCK, JEFFREY P 444 SEABREEZE BLVD., SUITE 900 DAYTONA BEACH FL 32118			7. Name and Address of New Registered Agent Name CHARLES L. STRASSER Street Address (P.O. Box Number is Not Acceptable) 1042 N US HWY 1 City Ormond Beach FL Zip Code 32174		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Charles L Strasser</i> (NOTE: Registered Agent signature required when renewing) DATE: _____					
<p>FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005</p>					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
		CHARLES L. STRASSER 1042 N US HWY 1 ORMOND BEACH, FL 32174	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	managing member	
		SANFORD MILLER 125 BASIN ST., SUITE 210 DAYTONA BEACH, FL 32114	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	member	
		LEWIS HEASTER 555 W. GRANADA BLVD. SUITE G-4 ORMOND BEACH, FL 32164	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	member	
		BARBARA HEASTER 555 W. GRANADA BLVD. SUITE G-4 ORMOND BEACH, FL 32164	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	member	
		CHARLES H. STRASSER 1200 JOHN ANDERSON DR. ORMOND BEACH, FL 32176	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	member	
			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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.					
SIGNATURE: <i>Charles L Strasser</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					