

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034307

Entity Name: AVIATORS DREAM LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

919 BISCAYNE BLVD.
HANGAR 10
DELAND, FL 32724 US

New Principal Place of Business:

2202 FLEET CIRCLE
ORLANDO, FL 32817 US

Current Mailing Address:

2202 FLEET CIRCLE
ORLANDO, FL 32817 US

New Mailing Address:

FEI Number: 68-0585464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARK, RICKY
2202 FLEET CIRCLE
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

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: MARK, DEBRA L
Address: 2202 FLEET CIRCLE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM () Delete
Name: MARK, RICKY
Address: 2202 FLEET CIRCLE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM (X) Delete
Name: FRANQUI, JOSE A
Address: 2202 FLEET CIRCLE
City-St-Zip: ORLANDO, FL 32817

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:

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: DEBRA L. MARK

MGMR

04/20/2009

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