

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072592

FILED
Apr 06, 2005
Secretary of State

Entity Name: ROYAL ATLANTIC AVIATION SERVICES, LLC.

Current Principal Place of Business:

12889 ATTRILL ROAD
JACKSONVILLE, FL 32258

New Principal Place of Business:

11920 ACOSTA ROAD
JACKSONVILLE, FL 32223

Current Mailing Address:

12889 ATTRILL ROAD
JACKSONVILLE, FL 32258

New Mailing Address:

11250 OLD ST. AUGUSTINE ROAD
BOX # 15-335
JACKSONVILLE, FL 32257

FEI Number: 20-1729425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUDWIG, JEFFREY R
5150 BELFORD ROAD, SOUTH
BUILDING 500
JACKSONVILLE, FL 32256 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/MEMBERS:

Title: MGRM () Delete
Name: BEATY, DONNIE D
Address: 12889 ATTRILL ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM () Delete
Name: CLARK, CAROL L
Address: 12889 ATTRILL ROAD
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BEATY, DONNIE D
Address: 11920 ACOSTA ROAD
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM (X) Change () Addition
Name: CLARK, CAROL L
Address: 11920 ACOSTA ROAD
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAROL L. CLARK

MGRM

04/06/2005

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