2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000078357

1. Entity Name
CHEYENNE AVIATION, LLC

Principal Place of Business	Mailing Address
1515 S. FEDERAL HIGHWAY, SUITE 300 BOCA RATON, FL 33432	1515 S. FEDERAL HIGHWAY, SUITE 300 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

03102008No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
37-1500487	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

JEFFREY A. DEUTCH, P.A.
7777 GLADES ROAD, SUITE 300
BOCA RATON, FL 33432

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	ALTMAN, JOEL L
STREET ADDRESS	1515 S FEDERAL HWY, STE 300
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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04/02/08-80051-015 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____   3/13/08   561 997-8661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #