

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088668

FILED
Mar 30, 2009
Secretary of State

Entity Name: AIRPORT PARKING, LLC

Current Principal Place of Business:

4908 OAK ISLAND ROAD
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

4908 OAK ISLAND ROAD
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 14-1920314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADISON, PETER D
4908 OAK ISLAND ROAD
ORLANDO, FL 32809 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: MADISON, PETER D
Address: 4908 OAK ISLAND ROAD
City-St-Zip: ORLANDO, FL 32809 US

Title: MGRM () Delete
Name: HARRINGTON, RICHARD G
Address: 4001 KASPER DRIVE
City-St-Zip: ORLANDO, FL 32806

Title: MGRM () Delete
Name: STOUT, ROBERT L
Address: 703 VALENCIA SHORES DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: HARRIS, GORDON H
Address: 1201 E ROBINSON STREET
City-St-Zip: ORLANDO, FL 32801

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: PETER D. MADISON

MGRM

03/30/2009

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