

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022046

Entity Name: G B AIR, LLC

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

2820 SE MARTIN SQUARE CORPORATE PKWY
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

2820 SE MARTIN SQUARE CORPORATE PKWY
STUART, FL 34994

New Mailing Address:

FEI Number: 20-2427500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRY, GARY LOU
2820 SE MARTIN SQUARE CORP. PKWY
STUART, FL 34994 US

Name and Address of New Registered Agent:

HENDRY, GARY L
2820 SE MARTIN SQUARE CORP. PKWY
STUART, FL 34994 US

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: GARY L. HENDRY

01/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HENDRY, GARY LOU
Address: 2820 SE MARTIN SQ. CORP. PKWY
City-St-Zip: STUART, FL 34994

Title: MGRM () Delete
Name: BYNUM, BLAIR M
Address: 1350 SW DYER POINT ROA
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HENDRY, GARY L
Address: 2820 SE MARTIN SQ. CORP. PKWY
City-St-Zip: STUART, FL 34994

Title: MGRM (X) Change () Addition
Name: BYNUM, BLAIR M
Address: 1350 SW DYER POINT RD.
City-St-Zip: PALM CITY, FL 34990

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: GARY L. HENDRY

MGRM

01/19/2009

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