

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064533

Entity Name: DLR AVIATION LLC

FILED
Jan 16, 2007
Secretary of State

Current Principal Place of Business:

25 SOUTH MAGNOLIA
ORLANDO, FL 32801 US

New Principal Place of Business:

321 N CRYSTALL LAKE DRIVE
SUITE 203
ORLANDO, FL 32803 US

Current Mailing Address:

P.O. BOX 340
OSPREY, FL 342290340 US

New Mailing Address:

FEI Number: 16-1777246 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIWARSKI, GLEN D
3284 MEADOW RUN COURT
VENICE, FL 34293 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: CEO () Delete
Name: SIWARSKI, GLEN
Address: 3284 MEADOW RUN COURT
City-St-Zip: VENICE, FL 34293

Title: MGRD () Delete
Name: LEWIS, DON
Address: 80 RIVERSIDE DRIVE
City-St-Zip: NEW YORK, NY 10024

Title: VP () Delete
Name: LEWIS, DON
Address: 80 RIVERSIDE DRIVE
City-St-Zip: NEW YORK, NY 10024

ADDITIONS/CHANGES:

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

Title: COO (X) Change () Addition
Name: LEWIN, RODNEY
Address: P.O. 340
City-St-Zip: OSPREY, FL 34229

Title: C/P (X) Change () Addition
Name: REINKE, RICHARD
Address: P.O. 340 OSPREY
City-St-Zip: OSPREY, FL 34229

I hereby certify that the information supplied with this filing does not qualify for the 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: GLEN D. SIWARSKI

CEO

01/16/2007

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