


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 15, 2007 8:00 am
Secretary of State

05-15-2007 90223 001 ***150.00

DOCUMENT # L05000075405 1. Entity Name AIRPORT BUSINESS PARK A-11, LLC			
Principal Place of Business 4264 A-ENTRE COURT CHANTILLY, VA 20151		Mailing Address 4264 A-ENTRE COURT CHANTILLY, VA 20151	
2. Principal Place of Business - No P.O. Box # 4264-Q ENTRE COURT Suite, Apt. #, etc.		3. Mailing Address 4264-Q ENTRE COURT Suite, Apt. #, etc.	
City & State CHANTILLY, VA Zip 20151		City & State CHANTILLY, VA Zip 20151	
4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent WILSON, MICHAEL J 200 S. ORANGE AVENUE SARASOTA, FL 34236		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PRUITT, CECIL JR 4264-Q ENTRE CT CHANTILLY, VA 20151 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: _____		CECIL PRUITT, JR. 4/25/07 703-631-2217	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	