

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095375

FILED
Apr 25, 2007
Secretary of State

Entity Name: JET WAR BIRD MATENANCE, LLC

Current Principal Place of Business:

P.O. BOX 169
SORRENTO, FL 32776

New Principal Place of Business:

31599 4TH STREET
SORRENTO, FL 32776

Current Mailing Address:

P.O. BOX 169
SORRENTO, FL 32776

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUGHAN, WILLIAM C
31599 4TH STREET
BOX 169
SORRENTO, FL 32776 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: BOUGHAN, WILLIAM C
Address: 31599 4TH STREET # 169
City-St-Zip: SORRENTO, FL 32776

Title: MGRM () Delete
Name: HANCOCK, MARK
Address: 8900 AIRPORT BOULEVARD
City-St-Zip: LEESBURG, FL 34788

Title: MGRM () Delete
Name: HARDY, PATRICK
Address: 8900 AIRPORT BOULEVARD
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: BOUGHAN, DONALD
Address: 31599 4TH STREET
City-St-Zip: SORRENTO, FL 32776

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: WILLIAM BOUGHAN

MGRM

04/25/2007

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