
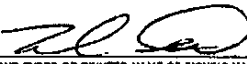


**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

03-20-2006 90201 012 \*\*\*150.00

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

3/

<b>DOCUMENT # L05000120237</b>					
1. Entity Name <b>TIM-PREP AIR, LLC</b> <b>n/k/a Brandy Air, LLC</b>					
Principal Place of Business <b>18500 MACCLENNEY ROAD JACKSONVILLE, FL 32234</b>			Mailing Address <b>18500 MACCLENNEY ROAD JACKSONVILLE, FL 32234</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number <b>20-4687832</b>				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 <b>AKEL, DANIEL D ONE INDEPENDENT DRIVE, SUITE 2301 JACKSONVILLE, FL 32202-5059</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when removing)</small> DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>				<b>Make check payable to Florida Department of State</b>	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STOKES, MICHAEL H 18500 MACCLENNEY ROAD JACKSONVILLE, FL 32234	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 			3-15-06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

**ATTACHMENT**

30005548

**HOLBROOK, AKEL, COLD, STIEFEL & RAY, P.A.**

ATTORNEYS AT LAW

ONE INDEPENDENT DRIVE, SUITE 2301

**JACKSONVILLE, FLORIDA 32202-5059**

EDWARD C. AKEL  
KATHLEEN HOLBROOK COLD  
DANIEL D. AKEL  
H. LEON HOLBROOK, III  
JOHN R. STIEFEL, JR.  
THOMAS R. RAY  
JOHN M. BENTON  
BETHANY RAY REICHARD  
TARA B. VAN ROOY

H. LEON HOLBROOK  
(1926-2005)

TELEPHONE  
(904) 356-6311

FACSIMILE  
(904) 356-7330

April 17, 2006

Florida Department of State  
**ATTN: ANNUAL REPORTS SECTION**  
Post Office Box 6478  
Tallahassee, Florida 32314

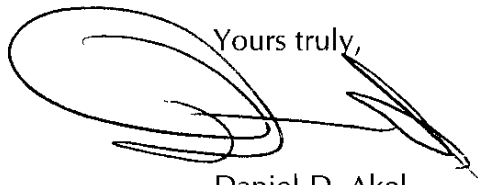
RE: Document #: L05000120237  
Tim-Prep Air, LLC n/k/a Brandy Air, LLC

Ladies and Gentlemen:

In accordance with your letter to our client of March 21, 2006 ( a copy being enclosed for your reference), we are enclosing to you our client's Uniform Business Report containing the tax identification number for same. As our client has already paid the \$150.00 annual report fee, please process this report at your earliest convenience in order to comply with the May 1, 2006 deadline.

Should you have any questions, please contact our office accordingly.

Yours truly,



Daniel D. Akel

DDA/sml  
Enclosures  
Cc: Michael H. Stokes, Manager