

**FILED**  
**Jul 10, 2008 8:00 am**  
**Secretary of State**

07-10-2008 90055 007 \*\*\*138.75

**2008 LIMITED LIABILITY COMPANY  
 ANNUAL REPORT**

DOCUMENT # L06000019098  
 1. Entity Name  
 FLOATS LIGHT SPORT AIRCRAFT LLC



Principal Place of Business      Mailing Address  
 7189 NW 52ND STREET      7189 NW 52ND STREET  
 BELL, FL 32619      BELL, FL 32619

**50008173**



**DO NOT WRITE IN THIS SPACE**

07032008 No Chg-LLC      CR2E083 (12/07)

4. FEI Number 20-4407187	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired        **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent  
 LUCKEY, JOHN  
 4045 NW 43RD ST  
 GAINESVILLE, FL 32606

**DO NOT WRITE  
 IN THIS SPACE**

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: *[Signature]*      DATE: 07-03-08

Signature, typed or printed name of registered agent, and fee if applicable      (NOTE: Registered Agent signature required when reinstating)      DATE

**FILE NOW!!! FEE IS \$138.75  
 Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR TANOUS, GARY 7189 NW 52ND STREET BELL, FL 32619
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**DO NOT WRITE  
 IN THIS SPACE**

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: *[Signature]*      DATE: 07-03-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #

ATTACHMENT

50008173

Gary Tanous

**From:** Cave, Cathy [CCave@dos.state.fl.us]  
**Sent:** Thursday, July 03, 2008 9:22 AM  
**To:** gary@floatslsa.com  
**Subject:** Annual Report  
**Attachments:** John Tanous.pdf

<<John Tanous.pdf>> Mr. Tanous,

Here is a copy of both 2008 annual reports with no late fees added. You may send them back to my attention if you like. Have a safe and Happy 4th. Call me if you have any questions or problems.

Cathy Cave  
Administrative Assistant II  
Division of Corporations  
Director's Office  
850-245-6000 (Office)  
850-245-6014 (Fax)

Please take a few minutes to provide feedback on the quality of service you received from our staff. The Florida Department of State values your feedback as a customer. Kurt Browning, Florida's Secretary of State, is committed to continuously assessing and improving the level and quality of services provided to you. Simply click on the link to the "DOS Customer Satisfaction Survey." Thank you in advance for your participation.

DOS Customer Satisfaction Survey:  
<http://survey.dos.state.fl.us/index.aspx?email=CCave@dos.state.fl.us>

Cathy - Thanks for your help.  
Does this take care of my  
Sales & Use Tax Too?  
I have made no money &  
paid no taxes.

Gary Tanous  
gary@floatslsa.com