

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000026003

Entity Name: AICIRTAP LLC

FILED
Mar 03, 2008
Secretary of State

Current Principal Place of Business:

27714 LAKE JEM ROAD
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

27714 LAKE JEM ROAD
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: 84-1425439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KRAUSE, DEBRA L
137 ACADEMY OAKS PLACE
ALTAMONTE SPRINGS, FL FL 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: LYBRAND, BRUCE E
Address: 27714 LAKE JEM ROAD
City-St-Zip: MOUNT DORA, FL 32757

Title: MGRM () Delete
Name: LYBRAND, PATRICIA C
Address: 27714 LAKE JEM ROAD
City-St-Zip: MOUNT DORA, FL 32757

Title: MGRM () Delete
Name: KRAUSE, DEBRA L
Address: 137 ACADEMY OAKS PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES:

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

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

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

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: DEBRA L KRAUSE

MGRM

03/03/2008

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