


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 08, 2007 8:00 am**  
**Secretary of State**

03-08-2007 90193 010 \*\*\*\*50.00

<b>DOCUMENT # L06000030700</b>	
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1. Entity Name  
**STEALTH AERIAL CAMERAS, LLC**

Principal Place of Business  
**400 N. NEW YORK AVENUE, SUITE 103  
WINTER PARK, FL 32789**

Mailing Address  
**400 N. NEW YORK AVENUE, SUITE 103  
WINTER PARK, FL 32789**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03012007 Chg-LLC CR2E083 (12/06)

4. FEI Number

**06-1162091**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**OGILVIE, C.H. JR  
400 N. NEW YORK AVENUE, SUITE 103  
WINTER PARK, FL 32789**

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

Signature, typed or printed name of registered agent and title if applicable.

(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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**MGR  
OGILVIE, C.H. JR  
400 N. NEW YORK AVENUE, SUITE 103  
WINTER PARK, FL 32789**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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10. ADDITIONS/CHANGES

TITLE  
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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

**3/1/07**