

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031867

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: CSPAN AVIATION LEASING, LLC

## Current Principal Place of Business:

2770 INDIAN RIVER BOULEVARD  
SUITE 201  
VERO BEACH, FL 32960 US

## New Principal Place of Business:

825 18TH STREET  
200  
VERO BEACH, FL 32960 US

## Current Mailing Address:

POST OFFICE BOX 644150  
VERO BEACH, FL 32964 US

## New Mailing Address:

FEI Number: 20-4573431      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARAVAGLIA, MICHAEL J  
756 BEACHLAND BOULEVARD  
VERO BEACH, FL 32963 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: MGR ( ) Delete  
Name: GARAVAGLIA, MICHAEL J  
Address: 2770 INDIAN RIVER BOULEVARD SUITE 201  
City-St-Zip: VERO BEACH, FL 32960 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BARNETT, STEVEN L  
Address: POST OFFICE BOX 644150  
City-St-Zip: VERO BEACH, FL 32964 US

Title: MGR ( ) Change (X) Addition  
Name: BLANE, W. CHRIS  
Address: POST OFFICE BOX 644150  
City-St-Zip: VERO BEACH, FL 32964

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: STEVEN BARNETT

MR.

04/17/2008

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