

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033150

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: EAGLE AIRCRAFT GROUP, LLC.

**Current Principal Place of Business:**

3240 CAPITAL CIRCLE SW  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2535  
TALLAHASSEE, FL 323162535

**New Mailing Address:**

FEI Number: 20-4625199

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

JONES, JOSEPH P  
215 SOUTH MONROE STREET  
SUITE 400  
TALLAHASSEE, FL 32301 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: LEDSON, RICH  
Address: 3240 CAPITAL CIRCLE S.W.  
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGRM ( ) Delete  
Name: ROSEN, PETERS S  
Address: PO BOX 2535  
City-St-Zip: TALLAHASSEE, FL 323162535

Title: MGRM ( ) Delete  
Name: LEONI, STEVEN M  
Address: PO BOX 2535  
City-St-Zip: TALLAHASSEE, FL 323162535

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

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LEONI, JONATHAN D  
Address: PO BOX 2535  
City-St-Zip: TALLAHASSEE, FL 323162535

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

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

Title: MGR ( ) Change (X) Addition  
Name: BURNETTE, JOHN T  
Address: PO BOX 2535  
City-St-Zip: TALLAHASSEE, FL 32316

Title: MGR ( ) Change (X) Addition  
Name: LEDSON, RICH  
Address: 3240 CAPITAL CIRCLE S.W.  
City-St-Zip: TALLAHASSEE, FL 32310

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: JONATHAN LEONI

MGRM

04/26/2007

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