


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L06000038114  
 1. Entity Name  
 NEW SPIRIT AVIATION, LLC



Principal Place of Business  
 322 SOUTHWEST COLUMBIA AVENUE  
 LAKE CITY, FL 32025

Mailing Address  
 P.O. BOX 3691  
 LAKE CITY, FL 32056

**DO NOT WRITE IN THIS SPACE**



01032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 56-2574315	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 WEIFFENBACH, DON DAVID  
 322 SOUTHWEST COLUMBIA AVENUE  
 LAKE CITY, FL 32025

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U00000782255  
 01/15/08-80066-017 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEIFFENBACH, DON DAVID 322 SOUTHWEST COLUMBIA AVENUE LAKE CITY, FL 32025
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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:  1-8-08 (386)623-1276  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

DON DAVID WEIFFENBACH