

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000072791

**FILED**  
**Feb 02, 2010**  
**Secretary of State**

**Entity Name:** BAY AREA AIR SYSTEMS, LLC

**Current Principal Place of Business:**

4438 WINDING RIVER DRIVE  
VALRICO, FL 33596

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6956  
BRANDON, FL 33508 US

**New Mailing Address:**

**FEI Number:** 20-5333408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHUSTA, HARVEY  
4438 WINDING RIVER DRIVE  
VALRICO, FL 33596 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  
**Name:** SHUSTA, HARVEY  
**Address:** 4438 WINDING RIVER DRIVE  
**City-St-Zip:** VALRICO, FL 33596 US

**Title:** MGRM  
**Name:** CONDON, WILLIAM J  
**Address:** 4527 PRESTON WOODS DRIVE  
**City-St-Zip:** VALRICO, FL 33596 US

**Title:** MGRM  
**Name:** SHUSTA, MATTHEW J  
**Address:** 4438 WINDING RIVER DRIVE  
**City-St-Zip:** VALRICO, FL 33596 US

**Title:** MGR  
**Name:** SHUSTA, JERI J  
**Address:** 4438 WINDING RIVER DRIVE  
**City-St-Zip:** VALRICO, FL 33596

I hereby 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:** HARVEY SHUSTA

MGRM

02/02/2010

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