

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094248

FILED  
Apr 13, 2007  
Secretary of State

**Entity Name:** ABS AVIATION MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

10014 N. DALE MABRY HWY  
SUITE 101  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

10014 N. DALE MABRY HWY  
SUITE 101  
TAMPA, FL 33618

**New Mailing Address:**

**FEI Number:** 02-0788851

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HODGES, MICHAEL A  
14734 WATERCHASE BLVD.  
TAMPA, FL 33626 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: HODGES, MICHAEL A  
Address: 10014 N. DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33618

Title: MGRM ( ) Delete  
Name: THOMPSON, ROBERTA A  
Address: 17040 PLEASURE ROAD  
City-St-Zip: CAPE CORAL, FL 33909

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL A. HODGES

MGR

04/13/2007

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