

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000026919

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** AVIATION MANAGEMENT, LLC

**Current Principal Place of Business:**

1042 N US HWY 1  
SUITE 15  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

1042 N US HWY 1  
SUITE 15  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

**FEI Number:** 20-8613193

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STRASSER, CHARLES L  
1042 N US HWY 1  
ORMOND BEACH, FL 32174 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  
**Name:** RIVER HOLDINGS AVIATION LLC  
**Address:** 1042 N US HWY 1  
**City-St-Zip:** ORMOND BEACH, FL 32174 US

**Title:** D  
**Name:** PS AVIATION LLC  
**Address:** 3701 OLSON DRIVE  
**City-St-Zip:** DAYTONA BEACH, FL 32124

**Title:** D  
**Name:** TI AVIATION, LLC  
**Address:** 3701 OLSON DRIVE  
**City-St-Zip:** DAYTONA BEACH, FL 32124

**Title:** D  
**Name:** TI AVIATION LLC  
**Address:** 3701 OLSON DRIVE  
**City-St-Zip:** DAYTONA BEACH, FL 32124

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:** CHARLES L. STRASSER

MGR

01/06/2010

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