## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000056994

Entity Name: STERLING AVIATION OF NAPLES, LLC

900 CHEYENNE AVENUE, SUITE 100

GRAFTON, WI 53024 US

Address:

City-St-Zip:

FILED May 06, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 900 CHEYENNE AVENUE SUITE 100 GRAFTON, WI 53024 **Current Mailing Address: New Mailing Address:** P.O. BOX 210 GRAFTON, WI 53024 US FEI Number: 39-1443595 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NAPLES-LAWDOCK, INC. 1395 PANTHER LANE SUITE 300 NAPLES, FL 34109 US 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete DOERR, CHRISTOPHER L Name: Name: Address: 900 CHEYENNE AVENUE, SUITE 100 Address: City-St-Zip: GRAFTON, WI 53024 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: DOERR, DANIEL L Name: Address: 900 CHEYENNE AVENUE. SUITE 100 Address: City-St-Zip: GRAFTON, WI 53024 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition GORT, ROB Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROB GORT PRES 05/06/2008