

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082367

FILED
Apr 10, 2009
Secretary of State

Entity Name: AEROKEY AVIATION SERVICES, LLC

Current Principal Place of Business:

7258 LAWN TENNIS LANE
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

7258 LAWN TENNIS LANE
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 26-0710788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLT, ROBERT S
601 BAYSHORE BLVD., SUITE 700
TAMPA, FL 33606 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: SMITH, BRIAN J
Address: 7258 LAWN TENNIS LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: CEOP () Delete
Name: SMITH, BRIAN J
Address: 7258 LAWN TENNIS LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: MGR () Delete
Name: COOK, DONALD J
Address: 7258 LAWN TENNIS LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: CFOS () Delete
Name: COOK, DONALD J
Address: 7258 LAWN TENNIS LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: MGRV () Delete
Name: CUSICK, TERRY L
Address: 7258 LAWN TENNIS LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: MGRV () Delete
Name: WALTER, DONALD
Address: 7258 LAWN TENNIS LANE
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES:

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

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

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

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

Title: () Change () Addition
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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 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: DONALD J COOK

CFOS

04/10/2009

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