

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098397

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: WHEELS UP AVIATION SERVICES LLC

## Current Principal Place of Business:

1471 SCARLETT WAY  
GREEN COVE SPRINGS,, FL 32043 US

## New Principal Place of Business:

1471 SCARLETT WAY  
FLEMING ISLAND, FL 32003 US

## Current Mailing Address:

1471 SCARLETT WAY  
GREEN COVE SPRINGS,, FL 32043 US

## New Mailing Address:

1471 SCARLETT WAY  
FLEMING ISLAND,, FL 32003 US

FEI Number: 32-0218598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHEELER, CHARLES H  
1471 SCARLETT WAY  
GREEN COVE SPRINGS, FL 32043 US

## Name and Address of New Registered Agent:

WHEELER, CHARLES H  
1471 SCARLETT WAY  
FLEMING ISLAND, FL 32003 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:

04/29/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: WHEELER, CHARLES H  
Address: 1471 SCARLETT WAY  
City-St-Zip: GREEN COVE SPRINGS,, FL 32043 US

Title: MGRM ( ) Delete  
Name: WHEELER, ANNETTE  
Address: 1471 SCARLETT WAY  
City-St-Zip: GREEN COVE SPRINGS,, FL 32043 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WHEELER, CHARLES H  
Address: 1471 SCARLETT WAY  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: MGR (X) Change ( ) Addition  
Name: WHEELER, ANNETTE  
Address: 1471 SCARLETT WAY  
City-St-Zip: FLEMING ISLAND, FL 32003 US

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: CHARLES H. WHEELER

MGRM

04/29/2009

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