

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L97000001057

Entity Name: WITHAM AERO CLUB, LLC

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2565 MOHAWK LN  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 371  
STUART, FL 34995

**New Mailing Address:**

FEI Number: 65-0808941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILCOX, MARSHAL L  
95 SOUTH RIVER RD  
STUART, FL 34996 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: MGRM  
Name: WILCOX, MARSHAL L  
Address: 95 SOUTH RIVER RD  
City-St-Zip: STUART, FL 34996

Title: MGRM  
Name: CYRUS, KISSLING  
Address: 4 MINDORO ST  
City-St-Zip: STUART, FL 34996

Title: MGRM  
Name: FLYNN, BRIAN G  
Address: 3198 NW DOCKAGE WAY  
City-St-Zip: PALM CITY, FL 34990

Title: T  
Name: FLYNN, BRIAN G  
Address: 3198 NW DOCKAGE WAY  
City-St-Zip: PALM CITY, FL 34990

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: MARSHAL L. WILCOX

MGRM

02/08/2012

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