

2001

1 UNIFORM BUSINESS REPORT (UBR)

03-05-2002 90016034 ***200.00

M00000002182

DOCUMENT # M00000002182

1. Entity Name

STEARNS AIRPORT EQUIPMENT COMPANY, LLC

Principal Place of Business

801 W. NORTH CARRIER PKWY.
GRAND PRAIRIE TX 75050

Mailing Address

801 W. NORTH CARRIER PKWY.
GRAND PRAIRIE TX 75050

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-2821121

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office, its registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

AL 11

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 7507 Bradford Pear Irving, TX 75063 →	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Fred VanAcker Irving, TX 75063 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 6773 Leameadow Dallas, TX 75248 →	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Operations Hank Arendt Dallas, TX 75248 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 5709 Eastman Plano, TX 75093 →	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Projects James Hsu Plano, TX 75093 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 3705 Overton Park East Ft. Worth, TX 76109 →	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Engineering William Walker Fort Worth, TX 76109 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

11-30-01 972-206-1936

FILED
SECRETARY OF STATE
TALLAHASSEE, FL
02 APR 11

DO NOT WRITE IN THIS SPACE

CR2E083 (11/00)