

2001

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, registered agent, or both, in the State of Florida.

SIGNATURE

Barbara A. Burke

BARBARA A. BURKE
SPECIAL ASSISTANT SECRETARY

2/15/02

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 Delete
STREET ADDRESS CITY-ST-ZIP
7507 Bradford Pear Irving, TX 75063 →

TITLE NAME Change Addition
STREET ADDRESS CITY-ST-ZIP
President Fred VanAcker Irving, TX 75063

TITLE NAME Delete
STREET ADDRESS CITY-ST-ZIP
6773 Leameadow Dallas, TX 75248 →

TITLE NAME Change Addition
STREET ADDRESS CITY-ST-ZIP
Director of Operations Hank Arendt Dallas, TX 75248

TITLE NAME Delete
STREET ADDRESS CITY-ST-ZIP
5709 Eastman Plano, TX 75093 →

TITLE NAME Change Addition
STREET ADDRESS CITY-ST-ZIP
Director of Projects James Hsu Plano, TX 75093

TITLE NAME Delete
STREET ADDRESS CITY-ST-ZIP
3705 Overton Park East Ft. Worth, TX 76109 →

TITLE NAME Change Addition
STREET ADDRESS CITY-ST-ZIP
Director of Engineering William Walker Fort Worth, TX 76109

TITLE NAME Delete
STREET ADDRESS CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS CITY-ST-ZIP

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:

W. Walker

11-30-01 972-206-1936

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

Date

Daytime Phone #

CR2E083 (11/00)

FILED
SECRETARY OF STATE
TALLAHASSEE, FL
02 APR 11



DO NOT WRITE IN THIS SPACE