

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # M00000002411**

1. Entity Name

**BEASLEY AIRCRAFT LEASING LLC**

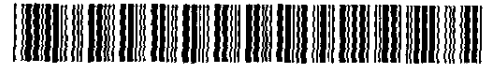


Principal Place of Business

**3033 RIVIERA DRIVE, SUITE 200  
NAPLES, FL 34103**

Mailing Address

**3033 RIVIERA DRIVE, SUITE 200  
NAPLES, FL 34103**



01182006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**59-3664647**

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BEASLEY, GEORGE  
3033 RIVIERA DRIVE, SUITE 200  
NAPLES, FL 34103**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BEASLEY, GEORGE
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 200
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000475689  
04/05/06-80024-008 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 605, Florida Statutes.

**SIGNATURE:**

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

3/17/06

239-263-5000

Date

Daytime Phone #