

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # M01000001796
 1. Entity Name
AIRKRAFFT, LLC



Principal Place of Business
7125 UPLAND GLADE
TALLAHASSEE, FL 32312

Mailing Address
7125 UPLAND GLADE
TALLAHASSEE, FL 32312



DO NOT WRITE IN THIS SPACE

07032007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 30-0082449	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, MARK J
104 N MAGNOLIA DR
TALLAHASSEE, FL 32301

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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 September 14, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HOLTON, ROBERT A 7125 UPLAND GLADE TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KRAFFT, MARIE E 7125 UPLAND GLADE TALLAHASSEE, FL 32312
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 07/06/07-80004-012 50.00

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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 608, Florida Statutes.

SIGNATURE: Mark J Jones **7/3/07** **(850) 224-7128**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #