

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 14, 2006 08:00 AM
Secretary of State

DOCUMENT # M01000002810

1. Entity Name
SMITH AIRCRAFT LEASING, LLC



Principal Place of Business

**4276 HWY 39
CHELSEA, AL 35043**

Mailing Address

**4276 HWY 39
CHELSEA, AL 35043**

DO NOT WRITE IN THIS SPACE



07102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
63-1283660

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**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 September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SMITH, STANLEY
4276 HWY 39
CHELSEA, AL 35043**

TITLE
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CITY-ST-ZIP

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U00000570149
07/14/06-80001-011 50.00

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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 608, Florida Statutes.

SIGNATURE: Stanley Smith

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

7-11-06 205-678-8911

Date

Daytime Phone #