

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001089

Entity Name: FLIGHT OPTIONS, LLC

FILED
Jul 06, 2005
Secretary of State

Current Principal Place of Business:

21680 CURTISS-WRIGHT PARKWAY
RICHMOND HEIGHTS, OH 44143

New Principal Place of Business:

Current Mailing Address:

21680 CURTISS-WRIGHT PARKWAY
RICHMOND HEIGHTS, OH 44143

New Mailing Address:

FEI Number: 04-3602316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: CFO () Delete
Name: BRODY, MARK E
Address: 26180 CURTISS-WRIGHT PKWY
City-St-Zip: RICHMOND HEIGHTS, FL 44143

Title: MGR () Delete
Name: FRANCESCONI, LOUISE
Address: 146 SPRING STREET
City-St-Zip: LEXINGTON, MA 02421

Title: MGR () Delete
Name: FRANKLIN, EDWARD
Address: 146 SPRING STREET
City-St-Zip: LEXINGTON, MA 02421

Title: MGR () Delete
Name: SIMPSON, KATHRYN A
Address: 146 SPRING STREET
City-St-Zip: LEXINGTON, MA 02421

Title: MGR () Delete
Name: METZ, TRAVIS
Address: TWO CANAL PK
City-St-Zip: CAMBRIDGE, MA 02141

Title: MGR () Delete
Name: PINKAS, ROBERT P
Address: 3201 ENTERPRISE PARKWAY, SUITE 350
City-St-Zip: BEACHWOOD, OH 44122

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: LARRY BRAINARD

TAX

07/06/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date