

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003599

Entity Name: ISC AVIATION, LLC

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

1300 ALTURA ROAD
FT. MILL, SC 29708

New Principal Place of Business:

Current Mailing Address:

1300 ALTURA ROAD
FT. MILL, SC 29708

New Mailing Address:

FEI Number: 57-1041626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YAGER, DEXTER R SR.
6055 SW MAPP ROAD
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: YAGER, JEFFREY S
Address: 1300 ALTURA ROAD
City-St-Zip: FT. MILL, SC 29708

Title: MGR () Delete
Name: YAGER, DOYLE L
Address: 1300 ALTURA ROAD
City-St-Zip: FT. MILL, SC 29708

Title: MGR () Delete
Name: YAGER, STEVEN T
Address: 1300 ALTURA ROAD
City-St-Zip: FT. MILL, SC 29708

Title: MGR () Delete
Name: EMERY, THOMAS K
Address: 1300 ALTURA ROAD
City-St-Zip: FT. MILL, SC 29708

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: THOMAS K. EMERY

CFO

02/05/2009

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