2006 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 24, 2006 08:00 AN Secretary of State DÓCUMENT # M05000000776 1. Entity Name SLOW FLIGHT AERO MARINE LEASING, LLC Principal Place of Business Mailing Address 1200 FLIGHLINE BLVD., SUITE 10 1200 FLIGHLINE BLVD., SUITE 10 DELAND, FL 32724 DELAND, FL 32724 04202006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2231628 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YOCUM, MICHAEL D DO NOT WRITE 448 N. PINE MEADOW DRIVE DELAND, FL 32724 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) HATTE WHEN THE TANK IN Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TITLE 02\09\09_Ann3P-nin 20\00 f00000231313 NAME YOCUM, MICHAEL D STREET ADDRESS 1200 FLIGHLINE BLVD., SUITE 10 DELAND, FL 32724 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this tilling 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 fimited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

AME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE