

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # M05000004757

1. Entity Name  
DTS AVIATION SERVICES LLC



Principal Place of Business  
8445 FREEPORT PKWY  
SUITE 400  
IRVING, TX 75063

Mailing Address  
8445 FREEPORT PKWY  
SUITE 400  
IRVING, TX 75063

**DO NOT WRITE IN THIS SPACE**

**FILED  
Apr 30, 2008 8:00 am  
Secretary of State**

04-30-2008 90029 005 \*\*\*138.75

60034346

04102008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 43-2053132	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> <b>\$5.00</b> 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

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DYNCORP INTERNATIONAL LLC
STREET ADDRESS	8445 FREEPORT PKWY SUITE 400
CITY-ST-ZIP	IRVING, TX 75063

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

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

4/25/08

214-524-6156

Date

Daytime Phone #