

2001 UNIFORM BUSINESS REPORT (UBR)

0032015 SP

DOCUMENT # M99000001395

1. Entity Name

INTREPID AVIATION PARTNERS II, LLC

FILED

01 APR 30 PM 6:24

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

5399 EAST HIGHWAY

C30-A, P.M.B. #244

SEAGROVE BEACH FL 32459

Mailing Address

5399 EAST HIGHWAY

C30-A, P.M.B. #244

SEAGROVE BEACH FL 32459

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-1793756

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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 \$50.00
Make Check Payable to Department of State**

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ANDERSON, RONALD K
5399 EAST HIGHWAY
SEAGROVE BEACH FL 32459** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Managing Member
Ronald K. Anderson
5399 East Hwy. C30-A, P.M.B. #244
Seagrove Beach, FL 32459** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
FINLEY, JOHN L
15 NATCHEZ STREET
SANTA ROSA FL 32459** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**100004217351-7
-05/15/01--01079--013
*****50.00 *****50.00** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
COX, ROBERT L
50 N. FRONT STREET, SUITE 1300
MEMPHIS TN 38103** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Member
Michael A. Goldberg
6303 Blue Lagoon Dr., Ste. 380
Miami, FL 33126** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Member
Mitsui & Co. Ltd.
2-1 Ohtemachi 1-Chome, Chiyodku
Tokyo 100-004, Japan** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/25/01

Date

Daytime Phone #

CR2E083 (11/00)