2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M9900002040 1. Entity Name MOUNTAIN HIGH AVIATION, L.L.C.

FILED Jan 16, 2007 08:00 AN Secretary of State



Principal Place of Business

2060 S. PATRICK DRIVE INDIAN HARBOUR BEACH, FL 32937

Mailing Address

2060 S, PATRICK DRIVE

INDIAN HARBOUR BEACH, FL 32937



DO NOT WRITE IN THIS SPACE

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

01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 83-0323725 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GATTI, WALTER J 722 LOGGERHEAD ISLAND DRIVE SATELLITE BEACH, FL 32937

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 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	Signarure, typert or printed name of registered agent and title if applicable	(NOTE Registered Agent signature regulared when reinstaling)	DATE
Filing Fee is \$50.00 Due by May 1, 2907			
9.	MATTAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	MGRM GATTI, WALTER J 722 LOGGERHEAD ISLAND DR. SATELLITE BEACH, FL 32937		•
TITLE NAME STREET ADDRESS CITY-SI-ZIP			1100000586112 01/16/07-80040-008 50.00
TITLE NAME SIREET ADORESS CHY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN	THIS SPACE
THE NAME STREET ADDRESS CITY-ST-ZIP			· .
TITLE NAME STREET ADDRESS CITY-SI-ZIP			
11. I hereby certify that the information supplied with this filing does not quality 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 employered to execute this report as required by Chapter 608, Florida Statutes.			