

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053644

Entity Name: GATE AVIATION, LLC

Current Principal Place of Business:

9540 SAN JOSE BLVD
JACKSONVILLE, FL 32257

Current Mailing Address:

P O BOX 23627
JACKSONVILLE, FL 32241 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HIEB, E. ALLEN JR
1301 RIVERPLACE BLVD
STE 1500
JACKSONVILLE, FL 32207 US

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

Authorized Person(s) Detail :

Title MVPTAS
Name LUEDERS, JACK C JR.
Address 9540 SAN JOSE BLVD
City-State-Zip: JACKSONVILLE FL 32257

Title MS
Name MCCORMACK, JAMES E
Address 9540 SAN JOSE BLVD
City-State-Zip: JACKSONVILLE FL 32257

Title MAS
Name GWALTNEY, JOSEPH F JR.
Address 9540 SAN JOSE BLVD
City-State-Zip: JACKSONVILLE FL 32257

Title MP
Name RHODES, T MITCHELL
Address 9540 SAN JOSE BLVD
City-State-Zip: JACKSONVILLE FL 32257

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES E MCCORMACK

SECRETARY

03/17/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date