

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000133464

**Entity Name:** FLIGHTSTAR AIRCRAFT SERVICES, LLC

**Current Principal Place of Business:**

6025 FLIGHTLINE DR, BLDG. 815  
JACKSONVILLE, FL 32221

**Current Mailing Address:**

6025 FLIGHTLINE DR, BLDG. 815  
JACKSONVILLE, FL 32221 US

**FEI Number:** 65-0755718

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

PEREZ, CECILIA B  
6025 FLIGHTLINE DR, BLDG. 815  
JACKSONVILLE, FL 32221 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:** CECILIA B PEREZ

03/28/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title DIRECTOR  
Name PEREZ, CECI  
Address 6025 FLIGHTLINE DR, BLDG. 815  
City-State-Zip: JACKSONVILLE FL 32221

Title SECRETARY, VP  
Name COLGAN, GREGORY  
Address 6025 FLIGHTLINE DR  
City-State-Zip: JACKSONVILLE FL 32221

Title COO  
Name ELDRED, MARK  
Address 6025 FLIGHTLINE DRIVE  
City-State-Zip: JACKSONVILLE FL 32221

Title CFO  
Name ACOSTA VIDAL, ALBERTO  
Address 6025 FLIGHTLINE DRIVE  
City-State-Zip: JACKSONVILLE FL 32221

*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:** CECILIA PEREZ

**DIRECTOR OF FINANCE**

03/28/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date