

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001945

**FILED**  
**Feb 08, 2007**  
**Secretary of State**

**Entity Name:** WINGEDFOOT MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

901 SOUTH OCEAN BLVD  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

1730 S FEDERAL HWY  
PMB 386  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 65-0994100      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

IACOBUCCI, NANCY L  
901 SOUTH OCEAN BLVD  
DELRAY BEACH, FL 33483      US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: IACOBUCCI, EDWARD E  
Address: 901 SOUTH OCEAN BLVD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR      ( ) Delete  
Name: NANCY, IACOBUCCI L  
Address: 901 S OCEAN BLVD  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: NANCY L IACOBUCCI

MGR

02/08/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date