

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006895

FILED  
Apr 25, 2012  
Secretary of State

Entity Name: WINGZWON, LLC

**Current Principal Place of Business:**

466 SW PORT ST. LUCIE BLVD.  
SUITE 106  
PORT ST. LUCIE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

403 SW THISTLE TRAIL  
PORT ST. LUCIE, FL 34953 US

**New Mailing Address:**

FEI Number: 20-8259534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRITZ, RALPH S P  
403 SW THISTLE TRAIL  
PORT ST. LUCIE, FL 349538205 US

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

FRITZ, RALPH S  
403 SW THISTLE TRAIL  
PORT ST. LUCIE, FL 349538205 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: RALPH S. FRITZ

04/25/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: FRITZ, RALPH S  
Address: 403 SW THISTLE TRAIL  
City-St-Zip: PORT ST. LUCIE, FL 349538205 US

Title: TREA  
Name: FRITZ, NONA L  
Address: 403 SW THISTLE TRAIL  
City-St-Zip: PORT ST. LUCIE, FL 349538205 US

Title: VP  
Name: FRITZ, STEVEN K  
Address: 3445 SW CATSKILL DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 349538205 US

I hereby 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: RALPH S. FRITZ

PRES

04/25/2012

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