


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90134 002 ****50.00

| | |
|---|---|
| DOCUMENT # M01000001725 |  |
| 1. Entity Name WELLINGTON BREAD, LLC | |

| | |
|---|---|
| Principal Place of Business 2414 N. WOODLAWN #201 WICHITA, KS 67220 | Mailing Address 2414 N. WOODLAWN #201 WICHITA, KS 67220 |
|---|---|

20024055



03142005No Chg-LLC CR2E083 (10/03)

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| | |
|---|---------------------------------------|
| 4. FEI Number 48-1248657 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

| |
|--|
| 6. Name and Address of Current Registered Agent |
| KIRK, WILLIAM N GOULD, COOKSEY, FENNELL ET AL, PA 979 BEACHLAND BLVD VERO BEACH, FL 32963 |

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IN THIS SPACE**

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR KAROLICK, H. ROGER 2414 N. WOODLAWN #201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR PAYNE, LARRY F 2414 N. WOODLAWN #201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR WIGGINS, DALE E 2414 N. WOODLAWN #201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR WALSH, WILLIAM J JR. 2414 N. WOODLAWN #201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR KIRK, ALBERT J 2414 N. WOODLAWN #201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR MILLER, KENNETH R 2414 N. WOODLAWN #201 WICHITA, KS 67220 |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empowered to prepare this report as required by Chapter 608, Florida Statutes.

SIGNATURE: William J. Walsh 3/24/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #