FILED Jul 05, 2006 8:00 am Secretary of State

04-27-2006 90023 022 ****50.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000087957 1. Entity Name
WINGHOUSE OF LAKELAND, LLC Principal Place of Business Mailing Address 7491 ULMERTON ROAD, SUITE B 7491 ULMERTON ROAD, SUITE B LARGO, FL 33771 LARGO, FL 33771 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 04072006 Chg-LLC CR2E083 (11/05) Applied For 4. FEI Number 20 -420 0) City & State City & State Not Applicable \$5.00 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FOWLER WHITE BOGGS BANKER P.A. ATTN: SALLY T. WOODWARD 501 E. KENNEDY BOULEVARD, SUITE 1700 Street Address (P.O. Box Number is Not Acceptable) **TAMPA, FL 33602** City Zio Code 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. Filing Fee is \$50.00 Due by May 1, 2006 Make check peveble to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES MGR MER, CRAWFORD, Change Addition TITLE TITLE -214 HARBORVIEW LANG LARGO, FL 33770 STREET ADDRESS STREET ADDRESS OTT-ST-20 C Octob Change Addition HAME MARKET STREET ADDRESS STREET ATTREES CITY-ST-ZP C114-51-8P MLE Delete IIILE Change ☐ Addition STREET ADDRESS STREET ACCRESS CITY-ST-ZP DTY-51-2P O Debte Change Addition 4446 STREET ACCORESS STREET ACCRESS CITY-ST-ZEP TITLE Detector MLE ☐ Change ☐ Addition NAME MAKE STREET ADDRESS STREET ADDRESS CITY-SI-RP CITY-ST-200 trus Change Antillies ☐ Deteta TITLE MANE MARK STREET AUCRESS STREET ADDRESS CITY-ST-DP 11. I hereby cartify that the information supplied with this filling does not quality for the exemptions contained in Chapter 110. Plorida 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 nade under oath; that I am a managing member or manager of the limited bability company or the receiver or trusted to execute this report as required by Chapter 608, Plorida Statutes. 727-555-2989 SIGNATURE:



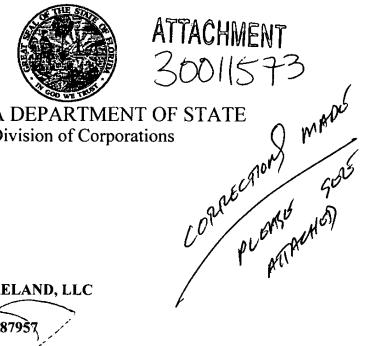
June 26, 2006

Dear Division of Corporations,

Attached are the corrections as requested to our Annual Report for reference numbers L05000024780, L05000087494 and L05000087957. Please contact me at 727-451-3491 with any questions.

Sincerely,

Frank Grandich



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

June 15, 2006

WINGHOUSE OF BEDFORD, LLC 7491 ULMERTON ROAD, SUITE B LARGO, FL 33771

Subject: WINGHOUSE OF LAKELAND, LLC

Reference Number:

L05000087957

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

List the complete title, name, street address, city, state and zip code of each manager, managing member or principal of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/mh ANNUAL REPORTS SECTION