

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000124711

**Entity Name:** FLYING EXPECTATIONS, LLC

**Current Principal Place of Business:**

6314 KINGSPONTE PARKWAY  
SUITE 3  
ORLANDO, FL 32819

**Current Mailing Address:**

6314 KINGSPONTE PARKWAY  
SUITE 3  
ORLANDO, FL 32819

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GREENBLATT, DEAN  
6314 KINGSPONTE PARKWAY  
SUITE 3  
ORLANDO, FL 32819 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MEGLER, MICHAEL  
Address 6314 KINGSPONTE PARKWAY, STE 3  
City-State-Zip: ORLANDO FL 32819

*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:** MICHAEL MEGLER

MGRM

02/24/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date