

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000003601

**FILED**  
**Apr 01, 2004**  
**Secretary of State**

**Entity Name:** ST. AUGUSTINE WINGS, LLC

**Current Principal Place of Business:**

1056 NORTH 3RD STREET  
JACKSONVILLE, FL 32250

**New Principal Place of Business:**

504 W. GEOFFREY ST.  
ST. AUGUSTINE, FL 32086

**Current Mailing Address:**

1056 NORTH 3RD STREET  
JACKSONVILLE, FL 32250

**New Mailing Address:**

**FEI Number:** 59-3641084

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAIG, LOUIS M  
1056 NORTH 3RD STREET  
JACKSONVILLE, FL 32250 US

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

BATSEL, ROBERT W  
2337 E. SILVER SPRINGS BLVD.  
OCALA, FL 34470 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: ROBERT W. BATSEL

04/01/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SCS MANAGEMENT GROUP, , INC.  
Address: 1056 NORTH 3RD STREET  
City-St-Zip: JACKSONVILLE, FL 32250

**ADDITIONS/CHANGES:**

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 Section 119.07(3)(i), 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: WILLIAM B. SCHEEL

MR.

04/01/2004

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