

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005423

Entity Name: WINGSPAN, LLC

FILED
Jul 19, 2004
Secretary of State

Current Principal Place of Business:

500 TRINITY LANE, #1207
ST. PETERSBURG, FL 33716

New Principal Place of Business:

11969 SEABREEZE COVE LANE
FT. MYERS, FL 33908

Current Mailing Address:

PO BOX 3303
CLEARWATER BEACH, FL 33767

New Mailing Address:

FEI Number: 81-0602289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEOD, PHILIP A
540 FOURTH STREET NORTH
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: WING, WILLIAM
Address: 500 TRINITY LANE, #1207
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WING, WILLIAM
Address: 11969 SEABREEZE COVE LANE
City-St-Zip: FT. MYERS, FL 33908

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 M. WING

MGR

07/19/2004

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