

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000011182**

1. Entity Name  
**SILVER WING PROPERTIES, LLC**



Principal Place of Business  
**100 SW 75TH STREET  
SUITE 205  
GAINESVILLE, FL 32607**

Mailing Address  
**100 SW 75TH STREET  
SUITE 205  
GAINESVILLE, FL 32607**



01312006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**03-0533704**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**PUGH, MERRILL  
100 SW 75TH STREET  
SUITE 205  
GAINESVILLE, FL 32607**

**DO NOT WRITE  
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

**Merrill Pugh**

**4/3/06**

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

U00000515262

**Filing Fee is \$50.00  
Due by May 1, 2006**

04/29/06-80204-006 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
PUGH, MERRILL  
100 SW 75TH STREET, STE 205  
GAINESVILLE, FL 32607**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
PIA, JOHN  
100 SW 75TH STREET, STE 205  
GAINESVILLE, FL 32607**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

**Merrill Pugh**

**4/3/06**

**352-331-3343**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #