2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046519

Entity Name: W.I.N. MANAGEMENT, LLC

FILED Mar 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6223 POPLAR GROVE DRIVE PORT ORANGE, FL 32127

Current Mailing Address: New Mailing Address:

6223 POPLAR GROVE DRIVE PORT ORANGE, FL 32127

FEI Number: 13-4273566 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOLTZ, KEVIN RICHARD HOLTZ, KEVIN R 6223 POPLAR GROVE DRIVE 6223 PÓPLAR GROVE DRIVE PORT ORANGE, FL 32127 PORT ORANGE, FL 32127

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: KEVIN RICHARD HOLTZ 03/22/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

MGRM () Delete (X) Change () Addition HOLTZ, KEVIN RICHARD HOLTZ, KEVIN R Name: Name: 6223 POPLAR GROVE DRIVE Address: 6223 POPLAR GROVE DRIVE Address:

City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM Title: MGR (X) Change () Addition () Delete Name: HOLTZ, KELLY Name: HOLTZ, KELLY

Address: 6223 POPLAR GROVE DRIVE Address: 6223 POPLAR GROVE DRIVE City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PORT ORANGE, FL 32127

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: KELLY HOLTZ 03/22/2004