2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L04000062771

WINGATE VIEW DEVELOPERS, L.L.C.

Principal Place of Business

Mailing Address

101-A BUSINESS CENTRE DRIVE DESTIN, FL 32550

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FILED Jun 23, 2008 8:00 am **Secretary of State**

06-23-2008 90155 009 ***538.75

50007367



02272008 No Chg-LLC

CR2E083 (12/07)

Applied For 4. FEI Number 20-1813367 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

DO NOT WRITE IN THIS SPACE

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6. Name and Address of Current Registered Agent

LEUCHTMAN, GARY B 501 COMMENDENCIA STREET PENSACOLA, FL 32502

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_	Signature, typed or printed name of registered agent and title if applicable. (NOTE; F	egistered Agent signature required when reinstating) DATE
- —FILE-NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGR	
NAME	AXIOM CAPITAL GROUP, LLC	
STREET ADDRESS	101-A BUSINESS CENTRE DR.	
CITY-ST-ZIP	DESTIN, FL 32550	
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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:

NAME STREET ADDRESS CITY-ST-ZIP

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

Daytime Phone #