# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 21, 2005**
**Secretary of State**

DOCUMENT# L04000077307

**Entity Name:** RIGHT WING, LLC

**Current Principal Place of Business:**

147 FAIRWAY OAKS DR.
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

147 FAIRWAY OAKS DR.
ORANGE PARK, FL 32003

**New Mailing Address:**

**FEI Number: 20-1797575** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BOOTH, MELISSA M
147 FARWAY OAKS DR.
ORANGE PARK, FL 32003 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: | MGRM | ( ) Delete |
| Name: | BOOTH, MELISSA M | |
| Address: | 147 FAIRWAY OAKS DR. | |
| City-St-Zip: | ORANGE PARK, FL 32003 | |
| Title: | MGRM | ( ) Delete |
| Name: | VANDER VLIES, JASON | |
| Address: | 12843 SHORECREST DR SW | |
| City-St-Zip: | SEATTLE, WA 98146 | |
| Title: | MGRM | ( ) Delete |
| Name: | VANDER VLIES, KAREN M | |
| Address: | 12843 SHORECREST DR SW | |
| City-St-Zip: | SEATTLE, WA 98146 | |

**ADDITIONS/CHANGES:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| 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: MELISSA M BOOTH MGRM 01/21/2005

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