

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008690

Entity Name: WINNCO, LLC

FILED
Aug 17, 2006
Secretary of State

Current Principal Place of Business:

4296 CUTLASS LANE
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

4296 CUTLASS LANE
NAPLES, FL 34102

New Mailing Address:

P O BOX 7512
NAPLES, FL 34101

FEI Number: 20-2263121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BLUME, CRAIG D ESQ.
800 HARBOUR DRIVE, SUITE 5
NAPLES, FL 34103 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/MANAGERS:

Title: MGR () Delete
Name: WINN, NANETTE D
Address: 4296 CUTLASS LANE
City-St-Zip: NAPLES, FL 34102

Title: MGR () Delete
Name: OPRON, CECILE C
Address: 5409 COVE CIRCLE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

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 Chapter 119, 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: NANETTE DION WINN

PRES

08/17/2006

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