

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000028243

1. Entity Name
PELICAN WING PUBLISHING, LLC



Principal Place of Business
1577 SAND CASTLE ROAD
SANIBEL ISLAND, FL 33957

Mailing Address
1577 SAND CASTLE ROAD
SANIBEL ISLAND, FL 33957



01242008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2627732

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GEORGE, JAMES F
1577 SAND CASTLE ROAD
SANIBEL ISLAND, FL 33957

**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: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000603138

02/05/08-80013-013 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ANDERSON, JIM
STREET ADDRESS	16681 CROWNSBERRY WAY
CITY-ST-ZIP	FORT MYERS, FL 33908
TITLE	MGRM
NAME	GEORGE, JAMES F
STREET ADDRESS	1577 SAND CASTLE ROAD
CITY-ST-ZIP	SANIBEL ISLAND, FL 33957
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: *J. George*

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

Date

Daytime Phone #

1/24/08

239-472-0168