

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 31, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000030173**

1. Entity Name

INNOVATIVE MANAGEMENT, LLC



Principal Place of Business

1178 BREAKERS WEST BLVD.  
WEST PALM BEACH, FL 33411

Mailing Address

1178 BREAKERS WEST BLVD.  
WEST PALM BEACH, FL 33411



01272007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2572345

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WINGKUN, EDWIN  
1178 BREAKERS WEST BLVD.  
WEST PALM BEACH, FL 33411

**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

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	EDWIN AND JANET WINGKUN AS TENANTS
STREET ADDRESS	1178 BREAKERS WEST BLVD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33411

TITLE	MGRM
NAME	EJNL LIMITED PARTNERSHIP, LP
STREET ADDRESS	1178 BREAKERS WEST BLVD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33411

TITLE	
NAME	
STREET ADDRESS	
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000000614112  
02/06/07-80012-015 50.00

**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:** *Ami L. Wyman, President*