

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000087494

1. Entity Name
WINGHOUSE OF ARLINGTON, LLC



Principal Place of Business

Mailing Address

**7491 ULMERTON ROAD, SUITE B
LARGO, FL 33771**

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LARGO, FL 33771**

FILED
Apr 30, 2007 08:00 AM
Secretary of State



04242007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-3936603

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**FOWLER WHITE BOGGS BANKER, P.A.
501 E KENNEDY BOULEVARD, SUITE 1700
TAMPA, FL 33602**

**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 NAME STREET ADDRESS CITY-ST-ZIP	MGR KER, CRAWFORD F 214 HARBORVIEW LANE LARGO, FL 33770
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**DO NOT WRITE
IN THIS SPACE**

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05/15/07-80132-014 50.00

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: _____

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

4/24/07

727-535-2939

Date

Daytime Phone #