

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jul 06, 2006
Secretary of State**

DOCUMENT# L05000107049

Entity Name: WINGS PROPERTIES, LLC

Current Principal Place of Business:

6450 KINGSPORTE PARKWAY, UNIT 9
ORLANDO, FL 32819

New Principal Place of Business:

6450 KINGSPORTE PARKWAY,
SUITE 9
ORLANDO, FL 32819

Current Mailing Address:

6450 KINGSPORTE PARKWAY, UNIT 9
ORLANDO, FL 32819

New Mailing Address:

6450 KINGSPORTE PARKWAY,
SUITE 9
ORLANDO, FL 32819

FEI Number: 20-3785764 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:

Name and Address of New Registered Agent:

BAKING ENTERTAINMENT, LLC
6450 KINGSPORTE PARKWAY, UNIT 9
ORLANDO, FL 32819 US

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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: BAKING ENTERTAINMENT, , LLC
Address: 6450 KINGSPORTE PARKWAY, UNIT 9
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: JBP, LLC,
Address: 6626 KINGSPORTE PARKWAY
City-St-Zip: ORLANDO, FL 32819

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: DOUGLAS INGALLS

MGRM

07/06/2006

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