

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107049

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: WINGS PROPERTIES, LLC

**Current Principal Place of Business:**

6450 KINGSPONTE PARKWAY,  
SUITE 9  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

6450 KINGSPONTE PARKWAY,  
SUITE 9  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 20-3785764      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

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

**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 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: MAX FROMBERG

M

04/27/2007

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