

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054974

FILED
May 21, 2009
Secretary of State

Entity Name: WINGING IT, LLC

Current Principal Place of Business:

3055 COUNTY ROAD 210 WEST
101
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

1321 BONEFISH COURT
FORT PIERCE, FL 34949

New Mailing Address:

FEI Number: 75-3219206 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:

TURK, BONNIE E
1321 BONEFISH COURT
FORT PIERCE, FL 34949 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:

Title: MGRM () Delete
Name: TURK, BONNIE E
Address: 4121 RUNNING BEAR LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGRM () Delete
Name: O'CONNOR, ALLISON
Address: 4121 RUNNING BEAR LANE
City-St-Zip: JACKSONVILLE, FL 32259

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: ALLISON O'CONNOR

MS.

05/21/2009

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