

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000058806

Entity Name: WINK WINK BABY LLC

FILED
Apr 11, 2009
Secretary of State

Current Principal Place of Business:

2013 GLENFIELD CROSSING CT
SAINT AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

2013 GLENFIELD CROSSING CT
SAINT AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 20-5395135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIM, KRISTA L
2013 GLENFIELD CROSSING CT.
SAINT AUGUSTINE, FL 32092 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: MS () Delete
Name: WILLIM, KRISTA L
Address: 2013 GLENFIELD CROSSING CT
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: MS () Delete
Name: GRAY, KATHARINE R
Address: 1985 GLENFIELD CROSSING CT
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

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: KRISTA LINDSEY WILLIM

MS

04/11/2009

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