2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089144

Entity Name: WINGED FOOT TITLE, LLC

FILED Sep 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8695 COLLEGE PARKWAY SUITE 103 FORT MYERS, FL 33919

Current Mailing Address: New Mailing Address:

8695 COLLEGE PARKWAY
SUITE 103
FORT MYERS, FL 33919

8695 COLLEGE PARKWAY
SUITE 1041
FORT MYERS, FL 33919

FORT MYERS, FL 33919

FEI Number: 72-1621060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BLACK, DAVID C
8963 SOMERSET BOULEVARD
FORT MYERS, FL 33919 US
BLACK, DAVID C
8695 COLLEGE PARKWAY
SUITE 1041
FORT MYERS, FL 33919 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: DAVID C. BLACK 09/03/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BLACK, DAVID C
 Name:

 Address:
 8963 SOMERSET BOULEVARD
 Address:

 City-St-Zip:
 FORT MYERS, FL 33919
 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: DAVID C. BLACK MGRM 09/03/2008