2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 20, 2009
Secretary of State

DOCUMENT# L08000001778

Entity Name: WILSON MANUFACTURING, LLC

Current Principal Place of Business:

4700 N.E. 11TH AVENUE
FT. LAUDERDALE, FL 33334 US

New Principal Place of Business:

Current Mailing Address:

4700 N.E. 11TH AVENUE
FT. LAUDERDALE, FL 33334 US

New Mailing Address:

FEI Number: 26-1742084 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, KEITH
4700 N.E. 11TH AVENUE
FT. LAUDERDALE, FL 33334 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:	WILSON, KEITH	
Address:	4700 N.E. 11TH AVENUE	
City-St-Zip:	FT. LAUDERDALE, FL 33334 US	
Title:	MGRM	(X) Delete
Name:	TACTICS RACING, INC.	
Address:	409 N. PACIFIC COAST HWY #576	
City-St-Zip:	REDONDO BEACH, CA 90277 US	
Title:	MGRM	( ) Delete
Name:	KKR GROUP, LLC	
Address:	12555 BISCAYNE BLVD # 727	
City-St-Zip:	N. MIAMI, FL 33181 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: KEITH WILSON MGRM 08/20/2009

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