

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000129655

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** THUNDER KISS WMC IRON ANGELS CREW LLC

**Current Principal Place of Business:**

280 VININGS WAY BLVD. APT 5106  
APT 5106  
DESTIN, FL 32541 US

**New Principal Place of Business:**

1603 DATE PALM DR  
NICEVILLE, FL 32578 US

**Current Mailing Address:**

280 VININGS WAY BLVD. APT 5106  
DESTIN, FL 32541 US

**New Mailing Address:**

PO BOX 1971  
NICEVILLE, FL 32588 US

**FEI Number:** 48-3790774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYES, AMY S  
280 VININGS WAY BLVD  
APT 5106  
DESTIN, FL 32541 US

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

HAYES, AMY S  
1603 DATE PALM DR  
NICEVILLE, FL 32578 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:**

04/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** HAYES, AMY S  
**Address:** PO BOX 1971  
**City-St-Zip:** NICEVILLE, FL 32588

**Title:** MGRM  
**Name:** WILKEY, JODIE  
**Address:** PO BOX 1971  
**City-St-Zip:** NICEVILLE, FL 32588

**Title:** MGRM  
**Name:** SZEKELY, LISA  
**Address:** PO BOX 1971  
**City-St-Zip:** NICEVILLE, FL 32588

I hereby 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:** AMY HAYES

MGR

04/20/2012

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