

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # M03000004075	
1. Entity Name FLORIDA WINGS GROUP, LLC	
Principal Place of Business 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301	Mailing Address PO BOX 11237 GREEN BAY, WI 54307



01242008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0250431	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) _____ DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000819371
02/15/08-80080-014 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KLISTER, PAUL A 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEYERS, ROBERT J 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VAN ABEL, PATRICK 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VAN ABEL, JOHN 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHELSKY, MARK 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LYSINGER, JAMES 111 N WASHINGTON ST STE 400 GREEN BAY, WI 54301

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Robert J Weyers Robert J Weyers 1/24/08 920-434-7800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #