

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M95819

FILED
Aug 01, 2007
Secretary of State

Entity Name: WINGS -N- WEENIES SOUTH, CO.

Current Principal Place of Business:

WINGS-N-WEENIES
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

5733 CLARK ROAD
SARSASOTA, FL 34233 US

New Mailing Address:

FEI Number: 65-0063376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGMAN, AMY G.
615 RAMBLIN ROSE LANE
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

SCARLETT, JR., DONALD W ESQ.
2940 S. TAMiami TRAIL
SARASOTA, FL 34239 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: DONALD W. SCARLETT, JR.

08/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPT () Delete
Name: BERGMAN, AMY G.,
Address: 615 RAMBLIN ROSE LANE
City-St-Zip: NOKOMIS, FL

Title: PS (X) Delete
Name: BERGMAN, RICHARD
Address: 615 RAMBLIN ROSE LANE
City-St-Zip: NOKOMIS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: PRITCHARD, JEFFREY
Address: 4805 CAPRI AVENUE
City-St-Zip: SARASOTA, FL 34235

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY PRITCHARD

PST

08/01/2007

Electronic Signature of Signing Officer or Director

Date