2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000026175

Entity Name: WINGS OF FIRE, INC.

FILED Apr 26, 2005 Secretary of State

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

397 E. JAMES LEE BLVD. CRESTVIEW, FL 32539

Current Mailing Address: New Mailing Address:

4631 SCARLET DR. EAST CRESTVIEW, FL 325395716 4631 SCARLET DR. EAST CRESTVIEW, FL 32539

FEI Number: 59-3721359 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:

CARITE, DONNA L
4631 SCARLET DR. EAST
CRESTVIEW, FL 325395716 US

CARITE, DONNA L
4631 SCARLET DR. EAST
CRESTVIEW, FL 32539 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: 04/26/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition

 Name:
 CARITE, DONNA L
 Name:
 CARITE, DONNA L

 Address:
 4631 SCARLET DR. EAST
 Address:
 4631 SCARLET DR. EAST

 City-St-Zip:
 CRESTVIEW, FL 325395716
 City-St-Zip:
 CRESTVIEW, FL 32539

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONNA L. CARITE DPST 04/26/2005