2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000150922

Entity Name: YOUR WINGS, INC.

FILED Mar 21, 2008 Secretary of State

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

349 BAY STREET 3050 SCHERER DR

PALM HARBOR, FL 34683 SUITE C

ST PETERSBURG, FL 33716 US

Current Mailing Address: New Mailing Address:

349 BAY STREET 3050 SCHERER DR

PALM HARBOR, FL 34683 SUITE C

ST PETERSBURG, FL 33716 US

FEI Number: 36-4563266 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CONNORS, GARY J

349 BAY STREET

3050 SCHERER DR

PALM HARBOR, FL 34683 US SUITE C ST PETERSBURG, FL 33716 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: 03/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: CONNORS, GARY J Name: CONNORS, GARY J
Address: 349 BAY STREET Address: 3050 SCHERER DR

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: ST PETERSBURG, FL 33716 US

 $\label{eq:title: S,T (X) Change () Addition} \begin{tabular}{ll} Title: & S,T & (X) Change () Addition \\ \end{tabular}$

Name: MARRERO, SANDRA J Name: MARRERO, SANDRA J Address: 349 BAY STREET Address: 3050 SCHERER DR

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: ST PETERSBURG, FL 33716 US

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: GARY J CONNORS PRES 03/21/2008