## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000151018

Address:

City-St-Zip:

6602 FRANCONIA DRIVE

ORLANDO, FL 32812 US

FILED Sep 13, 2009 Secretary of State

Entity Nan	ne: WHEE	ELS TO WINGS TRANSPORTATI	ON, INC.		
Current Principal Place of Business:			New Principal Place	of Business:	
6602 FRAN ORLANDO					
Current Mailing Address:			New Mailing Addres	s:	
6602 FRAN ORLANDO					
FEI Number:	37-1451230	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address o	f Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
MCKENZIE 6602 FRAN ORLANDO	ÍCONIA DF	RIVE	BUSINESS ENTERPI 4528 LIGHTHOUSE ORLANDO, FL 32818	CIR.	
The above in the State		ty submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	E: O'NEA	L BARNETT		09/13/2009	
	Elect	ronic Signature of Registered Age	ent	Date	
		.193(2)(b), F.S., the corporation did no cing Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	113 OAKMO	( ) Delete DONOVAN S DNT CIRCLE DWN, NY 08057 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	6602 FRAN	(X) Delete MICHAEL A CONIA DRIVE FL 32812 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	S DARIN, LOF	(X) Delete RI L	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DONOVAN MCKENZIE P 09/13/2009	
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