

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000003930

Entity Name: WINGS PLACE, INC.

FILED
Apr 12, 2007
Secretary of State

Current Principal Place of Business:

7210 W. MCNAB ROAD
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

7210 W. MCNAB ROAD
NORTH LAUDERDALE, FL 33068

New Mailing Address:

FEI Number: 65-0817207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENTIN, RICHARD C ESQ
4300 N. UNIVERSITY DRIVE
STE. D-202
FT. LAUDERDALE, FL 33351 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOUGHNEY, ROGER
Address: 7210 W. MCNAB ROAD
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: VP () Delete
Name: LOUGHNEY, MADELINE
Address: 7210 W. MCNAB ROAD
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: S () Delete
Name: LOUGHNEY, JAMES
Address: 7210 W. MCNAB ROAD
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: T () Delete
Name: LOUGHNEY, GREG
Address: 7210 W. MCNAB ROAD
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROGER LOUGHNEY

P

04/12/2007

Electronic Signature of Signing Officer or Director

Date