

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000064980

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** WEIDEL INTERNATIONAL INSURANCE AND FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

277 ROYAL POINCIANA WAY  
SUITE 119  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1007  
MONROE, GA 30655

**New Mailing Address:**

**FEI Number:** 90-0428114

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEIDEL, LAWRENCE W  
353 S. BROMELIAD  
WEST PALM BEACH, FL 33401 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WEIDEL, LAWRENCE W  
Address: 353 S BROMELIAD  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAWRENCE W WEIDEL

MGRM

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date