

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000123222

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** WILSON FAMILY ENTERPRISES, LLC

**Current Principal Place of Business:**

11850 S.R. 24  
CEDAR KEY, FL 32625

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 150  
CEDAR KEY, FL 32625

**New Mailing Address:**

**FEI Number:** 20-4276866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATSON, TODD  
ATTORNEY AT LAW  
7785 BAYMEADOWS WAY, SUITE 107  
JACKSONVILLE, FL 32256 US

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

WILSON, BRUCE  
11850 SR 24  
CEDAR KEY, FL 32625 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: BRUCE WILSON

04/29/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGM  
Name: WILSON, BRUCE R  
Address: P.O. BOX 150  
City-St-Zip: CEDAR KEY, FL 32625

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: BRUCE WILSON

MGM

04/29/2011

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