

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000013541

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** THE WIEPKING COMPANY, LLC

**Current Principal Place of Business:**

3159 FOXWOOD DRIVE  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

3159 FOXWOOD DRIVE  
APOPKA, FL 32703

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SIMS, ARTHUR D II  
7512 DR. PHILLIPS BLVD.  
SUITE 50-303  
ORLANDO, FL 32819 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: WIEPKING, GARY  
Address: 3159 FOXWOOD DRIVE  
City-St-Zip: APOPKA, FL 32703

Title: MGRM  
Name: WIEPKING, ELAINE S  
Address: 3159 FOXWOOD DRIVE  
City-St-Zip: APOPKA, FL 32703

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: GARY WIEPKING

MGRM

04/25/2012

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