

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000113239

Entity Name: W3 CEDAR KEY, LLC

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

16 SCONTICUT NECK ROAD., #211  
FAIRHAVEN, FL 02719

**New Principal Place of Business:**

1140 14TH AVENUE NORTH  
SAINT PETERSBURG, FL 33705

**Current Mailing Address:**

16 SCONTICUT NECK ROAD., #211  
FAIRHAVEN, FL 02719

**New Mailing Address:**

1140 14TH AVENUE NORTH  
SAINT PETERSBURG, FL 33705

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

KRAMER, ROBERT B  
48 CENTER STREET  
FAIRHAVEN, FL 02719 US

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

KRAMER FAMILY TRUST C/O DAVID KRAMER TSTEE  
1140 14TH AVENUE NORTH  
SAINT PETERSBURG, FL 33705 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: DAVID KRAMER

03/23/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KRAMER, DAVID M  
Address: 1140 14TH AVENUE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: MGRM  
Name: FLEEMAN, JEFF  
Address: 565 CONNECTICUT STREET  
City-St-Zip: SAN FRANCISCO, CA 94107

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: DAVID KRAMER

MGRM

03/23/2012

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