

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000098379

**FILED**  
**Feb 06, 2012**  
**Secretary of State**

**Entity Name:** WILLIAMS FAMILY INVESTMENTS, LLC

**Current Principal Place of Business:**

2563 SW 87TH DRIVE  
SUITE 10  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

2563 SW 87TH DRIVE  
SUITE 10  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

**FEI Number:** 20-8828699

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, THOMAS W JR  
2563 SW 87TH DRIVE  
SUITE 10  
GAINESVILLE, FL 32608 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:** WILLIAMS, THOMAS W JR  
**Address:** 2563 SW 87TH DRIVE, SUITE 10  
**City-St-Zip:** GAINESVILLE, FL 32608 US

**Title:** MGRM  
**Name:** WILLIAMS, ANNE E  
**Address:** 2563 SW 87TH DRIVE, SUITE 10  
**City-St-Zip:** GAINESVILLE, FL 32608 US

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:** TW WILLIAMS, JR.

MGRM

02/06/2012

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