

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000126576

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

**Entity Name:** USWF I, P.L.

**Current Principal Place of Business:**

430 MORTON PLANT STREET, SUITE 206  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

430 MORTON PLANT STREET, SUITE 206  
CLEARWATER, FL 33756

**New Mailing Address:**

**FEI Number:** 26-1725263

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KLAVANS, M. SCOTT D  
430 MORTON PLANT STREET, SUITE 206  
CLEARWATER, FL 33756 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:** MGR  
**Name:** JOHNSON, ROSS T  
**Address:** 14 WINDWARD ISLAND  
**City-St-Zip:** CLEARWATER BEACH, FL 33767

**Title:** MGR  
**Name:** STAFFORD, WILLIAM T  
**Address:** 206 HARBORVIEW LANE  
**City-St-Zip:** LARGO, FL 33770

**Title:** MGR  
**Name:** LAROSA, WILLIAM R  
**Address:** 409 ST ANDREWS  
**City-St-Zip:** BELLEAIR, FL 33756

**Title:** MGR  
**Name:** KLAVANS, SCOTT  
**Address:** 8871 SILVERTHORNE RD  
**City-St-Zip:** LARGO, FL 33777

**Title:** MGR  
**Name:** BARKLEY, CRAIG S  
**Address:** 30 SUNSET BAY DR  
**City-St-Zip:** BELLEAIR, FL 33756

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:** M. SCOTT KLAVANS

DR.

01/25/2012

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