

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000043607

**FILED**  
**Aug 27, 2012**  
**Secretary of State**

**Entity Name:** WGJ, LLC

**Current Principal Place of Business:**

232 SE 1ST STREET  
GAINESVILLE, FL 32601 UN

**New Principal Place of Business:**

**Current Mailing Address:**

232 SE 1ST STREET  
GAINESVILLE, FL 32601 UN

**New Mailing Address:**

**FEI Number:** 26-4806016

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARREN, OAKES  
215 SE 9TH ST  
GAINESVILLE, FL 32601 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:** OAKES, WARREN  
**Address:** 215 SE 9TH ST  
**City-St-Zip:** GAINESVILLE, FL 32601

**Title:** MGRM  
**Name:** IHDE, JACOB  
**Address:** 1209 NE 12 ST  
**City-St-Zip:** GAINESVILLE, FL 32601 UN

**Title:** MGRM  
**Name:** HUMPHREYS, GEOFF  
**Address:** 904 NE 11TH TERRACE  
**City-St-Zip:** GAINESVILLE, FL 32601 UN

**Title:** CFO  
**Name:** STEINBERG, ANDY  
**Address:** 215 SE 9TH STREET  
**City-St-Zip:** GAINESVILLE, FL 32601

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:** ANDY STEINBERG

CFO

08/27/2012

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