

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000077382

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** WEST FLORIDA GROUP I, LLC

**Current Principal Place of Business:**

913 GULF BREEZE PARKWAY  
SUITE 41  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

913 GULF BREEZE PARKWAY  
SUITE 41  
GULF BREEZE, FL 32561

**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:**

PALMER, CAROLYN A  
913 GULF BREEZE PARKWAY  
SUITE 41  
GULF BREEZE, FL 32561 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:** PALMER, CAROLYN A  
**Address:** 913 GULF BREEZE PARKWAY, SUITE 41  
**City-St-Zip:** GULF BREEZE, FL 32561

**Title:** MGRM  
**Name:** PALMER, RAYMOND B  
**Address:** 913 GULF BREEZE PARKWAY, #41  
**City-St-Zip:** GULF BREEZE, FL 32561

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: RAYMOND B. PALMER                      MGRM                      04/16/2012

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