

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000020600

FILED  
Feb 17, 2012  
Secretary of State

Entity Name: WHAT DO YOU THINK, LLC

**Current Principal Place of Business:**

8731 NW 17TH COURT  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

8731 NW 17TH COURT  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

FEI Number: 27-2311491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEMPNER LAW, PA  
2823 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308 US

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

KEMPNER LAW, PA  
1975 BUFORD BLVD.  
TALLAHASSEE, FL 32308 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:

02/17/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KEMPNER, WILLIAM A III  
Address: 1975 BUFORD BLVD.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM  
Name: KEMPNER, WILLIAM A  
Address: 8731 NW 17TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGRM  
Name: KEMPNER, DOROTHY M  
Address: 8731 NW 17TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGRM  
Name: FOLZ, BARBARA A  
Address: 3578 MOON BAY CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM  
Name: GONZALEZ, PAULA M  
Address: 531 FAIRFAX AVENUE  
City-St-Zip: DAVIE, FL 33325

Title: MGRM  
Name: MCDERMOTT, ANDREA E  
Address: 15030 TETHERCLIFT STREET  
City-St-Zip: DAVIE, FL 33331

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: WILLIAM A. KEMPNER III

CEO

02/17/2012

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