

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000063052

Entity Name: WENDLER VII LLC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5484 PELICAN WAY  
ST. AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

P/O BOX 654  
ST. AUGUSTINE, FL 32085

**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:**

WENDLER, DONNA R  
101 YACHT CLUB DR.  
ST. AUGUSTINE, FL 32084 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: WENDLER, DONNA R  
Address: P/O BOX 654  
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MGRM  
Name: WENDLER, RYAN W  
Address: P/O BOX 654  
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MGRM  
Name: WENDLER, AARON W  
Address: P/O BOX 654  
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MGMR  
Name: WENDLER, SCOTT  
Address: PO BOX 654  
City-St-Zip: ST. AUGUSTINE, FL 32085

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: DONNA R. WENDLER

MGRM

05/01/2012

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