

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064865

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** WIEBEL, HENNELLS & CARUFE, PLLC

**Current Principal Place of Business:**

9420 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

9420 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 65-0116709

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WIEBEL, DOUGLAS E  
9420 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135 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:** WIEBEL, DOUGLAS E  
**Address:** 9420 BONITA BEACH ROAD  
**City-St-Zip:** BONITA SPRINGS, FL 34135

**Title:** MGRM  
**Name:** HENNELLS, SCOTT D  
**Address:** 9420 BONITA BEACH ROAD  
**City-St-Zip:** BONITA SPRINGS, FL 34135

**Title:** MGR  
**Name:** WIEBEL, CAROL A  
**Address:** 9101 QUARTZ LANE  
**City-St-Zip:** NAPLES, FL 34120

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:** DOUGLAS E. WIEBEL

MGRM

01/09/2012

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