

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000022230

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

**Entity Name:** WESTWIND DEALER SERVICES L.L.C.

**Current Principal Place of Business:**

2111 NORTH GOLFVIEW DRIVE  
FLANT CITY, FL 33566 US

**New Principal Place of Business:**

14222 BANBURY WAY  
TAMPA, FL 33624 US

**Current Mailing Address:**

2111 NORTH GOLFVIEW DRIVE  
FLANT CITY, FL 33566 US

**New Mailing Address:**

14222 BANBURY WAY  
TAMPA, FL 33624 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

UNITED STATES CORPORATION AGENTS INC  
13302 WINDING OAK COURT  
TAMPA, FL 33612 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: BERRY, JOHN A JR.  
Address: 14222 BANBURY WAY  
City-St-Zip: TAMPA, FL 33624 US

Title: MGRM  
Name: SANDOVAL, CLAUDIA  
Address: 14222 BANBURY WAY  
City-St-Zip: TAMPA, FL 33624 US

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: JOHN A. BERRY JR.

MGRM

07/27/2012

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