

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000056989

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** DAVID WHITTINGHILL, PHD, PLLC

**Current Principal Place of Business:**

8515 BAYMEADOWS WAY  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

8515 BAYMEADOWS WAY  
JACKSONVILLE, FL 32256

**New Mailing Address:**

**FEI Number:** 27-3610663

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

WHITTINGHILL, WILLIAM D II  
8515 BAYMEADOWS WAY  
302  
JACKSONVILLE, FL 32256 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: WILLIAM D. WHITTINGHILL II

04/23/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WHITTINGHILL, WILLIAM D II  
Address: 8515 BAYMEADOWS WAY  
City-St-Zip: JACKSONVILLE, FL 32256

Title: S  
Name: WHITTINGHILL, WILLIAM D II  
Address: 8515 BAYMEADOWS WAY  
City-St-Zip: JACKSONVILLE, FL 32256

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 D WHITTINGHILL, II

MGR

04/23/2012

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