

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000082038

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** ALPHA WG LLC

**Current Principal Place of Business:**

9127 SW 52ND AVE  
D-301  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

9127 SW 52ND AVE  
D-301  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

**FEI Number:** 45-3191163

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CREWS, KYLE D  
9127 SW 52ND AVE  
D-301  
GAINESVILLE, FL 32608 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:** MGR  
**Name:** CREWS, KYLE D  
**Address:** 9127 SW 52ND AVE, APT D-301  
**City-St-Zip:** GAINESVILLE, FL 32608 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: KYLE D. CREWS

MGR

04/06/2012

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