

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000003268

Entity Name: WELLS CAPITAL GROUP,LLC

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

20283 STATE ROAD 7 SUITE 400  
BOCA RATON, FL 33498

**New Principal Place of Business:**

11101 S. CROWN WAY, SUITE 5  
WELLINGTON, FL 33414

**Current Mailing Address:**

20283 STATE ROAD 7 SUITE 400  
BOCA RATON, FL 33498

**New Mailing Address:**

11101 S. CROWN WAY, SUITE 5  
WELLINGTON, FL 33414

FEI Number: 38-3847191

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHAPIRO, COLLEEN  
20283 STATE ROAD 7 SUITE 400  
BOCA RATON, FL 33498 US

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

SHAPIRO, COLLEEN  
11101 S. CROWN WAY, SUITE 5  
WELLINGTON, FL 33414 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:

02/02/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SHAPIRO, COLLEEN  
Address: 11101 S. CROWN WAY, SUITE 5  
City-St-Zip: WELLINGTON, FL 33414

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: COLLEEN SHAPIRO

MGR

02/02/2012

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