

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000019904

**Entity Name:** WILLGOLD, LLC

**Current Principal Place of Business:**

5801 N.W. 151 STREET  
SUITE 307  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

5801 N.W. 151 STREET  
SUITE 307  
MIAMI LAKES, FL 33014

**FEI Number:** 56-2566282

**Certificate of Status Desired:** No

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

GOLD, STUART M  
5801 N.W. 151 STREET  
SUITE 307  
MIAMI LAKES, FL 33014 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GOLD, STUART M  
Address 5801 N.W. 151 STREET, SUITE 307  
City-State-Zip: MIAMI LAKES FL 33014

Title MGRM  
Name WILLINGER, SCOTT R  
Address 5801 N.W. 151 STREET, SUITE 307  
City-State-Zip: MIAMI LAKES FL 33014

Title MGRM  
Name GOLD, GAYLE R  
Address 5801 N.W. 151 STREET, SUITE 307  
City-State-Zip: MIAMI LAKES FL 33014

Title MGRM  
Name WILLINGER, LINDA  
Address 5801 N.W. 151 STREET, SUITE 307  
City-State-Zip: MIAMI LAKES FL 33014

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STUART M. GOLD

MGRM

01/15/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date