


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 16, 2007 8:00 am
Secretary of State

04-24-2007 90108 042 ****50.00

DOCUMENT # L03000008869 1. Entity Name MONTOUR WESTERN WAY, LLC	
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Principal Place of Business ONE INDEPENDENT DRIVE SUITE 2401 JACKSONVILLE, FL 32202	Mailing Address ONE INDEPENDENT DRIVE SUITE 2401 JACKSONVILLE, FL 32202
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DO NOT WRITE IN THIS SPACE

30008023



01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
**MONTOUR, GARY M
ONE INDEPENDENT DRIVE
SUITE 2401
JACKSONVILLE, FL 32202**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Gary Montour* DATE 4/17/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing.)

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MONTOUR, GARY M ONE INDEPENDENT DRIVE, SUITE 2401 JACKSONVILLE, FL 32202
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Gary Montour* Date 5/8/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE