#### 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

### DOCUMENT # A0300000865

1. Entity Name

WESTCITY PLANTATION, LTD.

Principal Place of Business

ONE FINANCIAL PLZ

SUITE 102 FT LAUDERDALE, FL 33394 Mailing Address

ONE FINANCIAL PLZ

SUITE 102 FT LAUDERDALE, FL 33394

## FILED Apr 22, 2008 08:00 AN Secretary of State



04112008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-0041175

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMIGRAN, KENNETH H ONE FINANCIAL PLZ SUITE 102

FT LAUDERDALE, FL 33394

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of changing its registered the obligations of registered agent.</li></ol>	ed office or registered agent, or both, in the State of Florida.	I am familiar with, and accept
SIGNATURE Supply by Market or product narrow of consistent appeal and tills of product his		NATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

		NOTE: General Partners MAY NOT be changed on the		
	12.	GENERAL PARTNER INFORMATION		
	DOCUMENT #	L03000010056		
	NAME	WESTCITY LAKESIDE DEVELOPMENT, LLC		
	STREET ADDRESS	ONE FINANCIAL PLZ, SUITE 102		
	CITY-ST-ZIP	FT LAUDERDALE, FL 33394		
	DOCUMENT #			
	NAME			
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ا ڋ	NAME			
	STREET ADDRESS			

U00000913951 05/08/08-80039-001 500.00

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14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

CITY ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED

ITED HAME OF SIGNING GENERAL PARTNER

H. Simigro-

4-17-68

(954)727-0530

Daytime Phone #