


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 22, 2008 08:00 AM
Secretary of State

| | |
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| DOCUMENT # A05000000991 |  |
| 1. Entity Name WESTCITY VERANDA, LTD. | |

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|--|--|
| Principal Place of Business ONE FINANCIAL PLAZA SUITE 102 FT LAUDERDALE, FL 33394 | Mailing Address ONE FINANCIAL PLAZA SUITE 102 FT LAUDERDALE, FL 33394 |
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|--|---------|---------------------|---------|
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |



04112008 Chg-LP CR2E003 (12/06)

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|---|--|--|
| 4. FEI Number 20-2874192 | | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required |

| | | | |
|---|--|---|--|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| DOUGLAS, STEPHEN M ONE FINANCIAL PLAZA SUITE 102 FT LAUDERDALE, FL 33394 | | Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

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.

| 12. GENERAL PARTNER INFORMATION | | 13. ADDRESS CHANGES ONLY | |
|---|--|-----------------------------------|-------------------------------|
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | L04000071605 WESTCITY VERANDA, LLC ONE FINANCIAL PLAZA, SUITE 102 FT LAUDERDALE, FL 33394 | STREET ADDRESS CITY - ST - ZIP | 05/08/08-80039-003 500.00 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | |
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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: Stephen M. Douglas 4-17-08 (954) 727-0330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE