202 0111 01111 00011200 1121 0111 (0001)							
DOCUMENT # A07630						FILED	
WESTGATE, LTD.						02 FEB 20 AM 11: 03	
						SECRETARY OF STATE	
Principal Place of Business Mailing Address 3740 BEACH BLVD., SUITE 300 3740 BEACH BLVD. SUITE				TE 300		TÄLLÄHÄSSEE. FLÖRIDA	
1001 011102 0011 11000			OST OFFICE BOX 47050 ACKSONVILLE FL 32247	******			
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2002	
City & State			City & State			4. FEI Number 59-1991279 Applied For Not Applicable	
Zip Country		2	Zip Country		ry	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Addres	ss of Current Regist	ered Agent			7. Name and Address of New Registered Agent	
					Name		
DEMETREE, JACK C. 3740 BEACH BLVD.					Street Address (P.O. Box Number is Not Acceptable)		
SUITE 300				•			
JACKSONVILLE FL 32207					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.							
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions					outions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE	
as Shown on record. in FLORIDA to dat						SEE REVERSE SIDE FOR FEE INFORMATION	
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	ENT # L9800003512 JCD WESTGATE, LLC.			STRE	et address	1000050326718	
STREET ADDRESS 3740 BEACH BLVD, STE-300				CITY-	-ST-ZIP	-03/01/0201058025 ****535.00 **** 528.25	
CITY-ST-ZIP DOCUMENT #	L98000003513			STRE	ET ADDRESS	\$35.W	
NAME Street address	WCD WESTGATE, L.L.C. 3740 BEACH BLVD, STE-300				-ST-ZIP		
CITY-ST-ZIP	JACKSONVILLE FL		<u></u>				
DOCUMENT # NAME	*		t in in the second	STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			. <u></u>	CITY	-ST-ZIP		
DOCUMENT # NAME	· -			STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP		
DOCUMENT #				STRE	ET ADDRESS		
NAME STREET, ADDRESS				CITY	-ST-ZIP		
CITY-ST-ZIP DOCUMĚNT #				2100	ET ADDRESS		
NAME STREET ADDRESS							
CITY-ST-ZIP				CHY	-ST-ZIP	·	
				L		ection 119.07(3)(i), Florida Statutes. I further certify that the information	

SIGNATURE: Just Jone Lee SIGNATURE AND TYPED OR PRINT

CR2E003 (9/01)