


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A99000001532 1. Entity Name WEST POINTE VILLAS, LTD.	
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Principal Place of Business 800 NORTH HIGHLAND AVE., SUITE 200 ORLANDO, FL 32803	Mailing Address 707 MENDHAM BOULEVARD, SUITE 201 ORLANDO, FL 32825
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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FILED
 07 MAY 18 AM 9:42
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



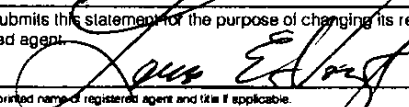
04062007 Chg-LP CR2E003 (12/06)

4. FEI Number 59-3601519	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LAGER, JILL 1665 PALM BEACH LAKES BLVD. SUITE 400 WEST PALM BEACH, FL 33401

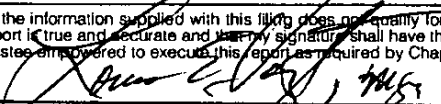
7. Name and Address of New Registered Agent Name LOUIS E. VOLT Street Address (P.O. Box Number is Not Acceptable) 707 MENDHAM BLVD, STE 201 City ORLANDO FL 32825

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 04/09/07

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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 #	L06000069587	STREET ADDRESS	DU0103608990
NAME	BRM WEST POINTE, LLC	CITY - ST - ZIP	05/31/07 01027 022 **500.00
STREET ADDRESS	707 MENDHAM BOULEVARD, SUITE 201		
CITY - ST - ZIP	ORLANDO, FL 32825		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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STREET ADDRESS			
CITY - ST - ZIP			

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 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.	
BY: 	DATE 04/09/07 401-3M-0600