2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B08000000262

Entity Name: JLC-WESTPLAN FIELDCREST ASSOCIATES, LP

FILED Apr 08, 2009 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|---|---------------------------------|---|---------------------------------------|
| 1575 NORTHSIDE DR BLDG 100 - STE 200 ATLANTA, GA 30318 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| 1575 NORTHSIDE DR BLDG 100 - STE 200 ATLANTA, GA 30318 | | | |
| FEI Number: 26-3693447 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| BROOME, STEPHEN D 822 A1A NORTH STE 208 PONTE VEDRA BEACH, | FL 32082 US | | |
| The above named entity s in the State of Florida. | ubmits this statement for the p | ourpose of changing its registered | l office or registered agent, or both |
| SIGNATURE: | | | |
| Electronic Signature of Registered Age | | ent | Date |
| GENERAL PARTNER INFORM | ATION: | ADDRESS CHANGES ONL | Y: |
| Document #: M08000005353 | | | |

Name: SUNCOAST FIELDCREST GP, LLC

1575 NORTHSIDE DR - BLDG 100 - STE 200 Address:

Address: City-St-Zip: ATLANTA, GA 30318 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 D. BROOM **AGT** 04/08/2009