

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B09000000128

Entity Name: WEST JACKSONVILLE, LP

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1404 SOUTH ANDREWS AVENUE  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

10525 VISTA SORRENTO PARKWAY  
#110  
SAN DIEGO, CA 92121

**New Mailing Address:**

FEI Number: 27-0920469      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PARACORP INCORPORATED  
236 EAST 6TH AVENUE  
TALLAHASSEE, FL 32303      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: F06000001926  
Name: WESTERN DEVCON, INC.  
Address: 10525 VISTA SORRENTO PARKWAY, STE. 110  
City-St-Zip: SAN DIEGO, CA 92101

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #: M11000000290  
Name: WEST JACKSONVILLE GP, LLC  
Address: 10525 VISTA SORRENTO PARKWAY, STE. 110  
City-St-Zip: SAN DIEGO, CA 92121

Address:  
City-St-Zip:

I hereby 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: MICHAEL P. IBE

G.P.

04/07/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date