

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010572

Entity Name: WESTLAKE MILLER, LLC

FILED
Jan 21, 2006
Secretary of State

Current Principal Place of Business:

505 AVE. 'A' N.W.
STE 102
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 21850
LOS ANGELES, CA 90021

New Mailing Address:

FEI Number: 59-3667639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FINANCIAL FOUNDATIONS, INC.
3150 SANDY RIDGE DR.
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

POMEROY, KENT S
505 AVE 'A' N.W.
STE 102
WINTER HAVEN, FL 33881 US

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: KENT S POMEROY

01/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LIEFER, DALE G
Address: 1320 E. OLYMPIC BLVD #208
City-St-Zip: LOS ANGELES, CA 90021

Title: MGR () Delete
Name: MILLER, JEFFREY A
Address: 1320 E. OLYMPIC BLVD #208
City-St-Zip: LOS ANGELES, CA 90021

Title: MGR () Delete
Name: POMEROY, KENT S
Address: 1320 E. OLYMPIC BLVD #208
City-St-Zip: LOS ANGELES, CA 90021

Title: MGR () Delete
Name: GIDDINGS, WYNE
Address: 361 ESCAMBIA DR.
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KENT S POMEROY

CFO

01/21/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date