2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000011063

WESTON TOWN PLACE SUITES INVESTORS, L.C.



FILED Jan 09, 2004 08:00 AM Secretary of State

Principal Place of Business 7806 CHARNEY LANE BOCA RATON, FL 33496 Mailing Address 7806 CHARNEY LANE BOCA RATON, FL 33496



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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1040185 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

SUSI, SAMUEL

DO NOT WRITE

BOCA RATON, FL 33496		IN THIS SPACE		
8. The above the obligat	e named entity submits this statement for the purpose of chations of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am famili	ar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating) DATE		
Fi D	iling Fee is \$50.00 ue by May 1, 2004		<u>,, , , , , , , , , , , , , , , , , , ,</u>	
9.	MANAGING MEMBERS/MANAGERS		<u> i</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-\$T-ZIP	MGRM SUSI, SAMUEL 7806 CHARNEY LANE BOCA RATON, FL 33496	U00000001672 01/12/04-80018-023	55.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS GITY-ST-ZIP		IN THIS SPACE	IN THIS SPACE	
TITLE NAME STREET ADDRESS				

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

1/6/2004

(\$61) 483-2030