2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000000326

1. Entity Name

WEST END SHOPPES, L.C.



Principal Place of Business

575 S WICKHAM RD

SUITE E

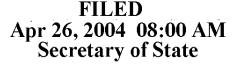
WEST MELBOURNE, FL 32904

Mailing Address

575 S WICKHAM RD

SUITE E

WEST MELBOURNE, FL 32904





03052004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-2827484

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CLARK, COY A 575 S WICKHAM RD SUITE E WEST MELBOURNE, FL 32904

DO NOT WRITE IN THIS SPACE

	nt for the purpose of changi	ing its registered office or registered agent, or both, i	n the State of Florida.	I am familiar with, and accept
the obligations of registered agent.				
SIGNATURE				
Signature, typed or printed name of registered a	agent and title if applicable.	(NOTE. Registered Agent signature required when reinstating)		DATE
		4- · · · · · · · · · · · · · · · · · · ·		

Filing Fee is \$50.00 Due by May 1, 2004

1		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM CLARK, COY A 575 SO. WICKHAM ROAD- STE. E WEST MELBOURNE, FL 32904	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		 ·

U00000130342 04/26/04-80114-016 50.00

DO NOT WRITE IN THIS SPACE

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:

Car a. Clair

Coy A CLACK

4/14/04

321-723-9888