2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT #L01000003811 1. Entity Name

FILED Mar 19, 2007 8:00 am Secretary of State 03-19-2007 90462 045 ****50.00

WEST-E	ND BUSI	NESS PARK, L.L.	C.											
Principal Place of Business 4320 WOODLAND PARK DRIVE WEST MELBOURNE, FL 32904				Mailing Address 4320 WOODLAND PARK DRIVE WEST MELBOURNE, FL 32904			40037542							
2. Principal Place of Business - No P.O. Box #			3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03122007	c	Chg-LLC		CR2E	E083 (12/06))	
City & State			City & State	City & State			4. FEI Numb		31				pplied For lot Applicable	
Zip		Country	Zip	Zip Country			5. Certificate of Status Desired \$5.00 Additional Fee Required							
	6. Name	and Address of Currer	nt Registered Agent				7. Name an	d Add	ress of N	ew Re	gistered	l Agent		
					Name									
HEALY, PATRICK F ESQ. 1499 SOUTH HARBOR CITY BOULEVAR MELBOURNE, FL 32901			ARD, STE 201	D, STE 201		Street Address (P.O. Box Number is Not Acceptable)								
					City		- <u></u> :				F	Zip Co	de	
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the obligat	tions of regist	ly submits this statement lered agent.	for the purpose of changing its	s register	ed office or	register	ed agent, or b	oth, in	the State	of Flori	da, I ar	n tamiliar with	i, and accept	
SIGNATURE	Signature, typed	or printed name of registered age	int and title if applicable (NO	TE: Registere	id Agent sig nati	ure required	when reinstating)				DATE			
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 improvement to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

W. KOBERT ANDERSON JR. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

321-723-3400