

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90307 037 ***138.75

DOCUMENT # L01000007615					
1. Entity Name WESTCITY REALTY ADVISORS, LLC					
Principal Place of Business ONE FINANCIAL PLAZA STE 102 FORT LAUDERDALE, FL 33394			Mailing Address ONE FINANCIAL PLAZA STE 102 FORT LAUDERDALE, FL 33394		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1104432	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent			
SIMIGRAN, KENNETH H ONE FINANCIAL PLAZA STE 102 FORT LAUDERDALE, FL 33394		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Kenneth H. Simigran</u> 4-17-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SIMIGRAN, KENNETH ONE FINANCIAL PLAZA STE 102 FORT LAUDERDALE, FL 33394	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	mgrm Simigran, Kenneth H. One Financial Plaza Ste 102 Ft. Lauderdale FL 33394	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DOUGLAS, STEPHEN ONE FINANCIAL PLAZA STE 102 FORT LAUDERDALE, FL 33394	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	mgrm Douglas, Stephen M. One Financial Plaza Ste 102 Ft. Lauderdale FL 33394	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Kenneth H. Simigran</u> (954) 722-0330 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					