

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

04-07-2008 90224 015 \*\*\*138.75

60020036



01182008No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3736163	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DOCUMENT # L01000012372

1. Entity Name  
L.H. WEST, LLC



Principal Place of Business 1151 NORTH ORANGE AVE WINTER PARK, FL 32789 US	Mailing Address 1151 NORTH ORANGE AVE WINTER PARK, FL 32789 US
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

TATICH, PHILIP  
 1151 N ORANGE AVE  
 WINTER PARK, FL 32789

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM. LEFKOWITZ, HOWARD B 1151 NORTH ORANGE AVE WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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: Howard B. Lefkowitz 4/2/08 407-667-8989  
 Mgrm

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #