

2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

**FILED**  
**Apr 27, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000013418

1. Entity Name

WESTCITY PALMETTO PARK, LLC



Principal Place of Business

150 E PALMETTO PARK ROAD #401  
BOCA RATON, FL 33432

Mailing Address

150 E PALMETTO PARK ROAD #401  
SUITE 3  
BOCA RATON, FL 33432



04202004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
65-1138401

☐ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

☒ **\$5.00** Additional  
Fees Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

SIMIGRAN, KENNETH H  
150 E PALMETTO PARK ROAD #401  
BOCA RATON, FL 33432

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

UD00000133542  
04/27/04-80092-010 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME SMIGRAN, KENNETH  
STREET ADDRESS 150 E PALMETTO PARK ROAD #401  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE MGRM  
NAME DOUGLAS, STEPHEN  
STREET ADDRESS 150 E PALMETTO PARK ROAD #401  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE  
NAME  
STREET ADDRESS 150 E PALMETTO PARK ROAD, #401  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #