


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000018200</b> 1. Entity Name WEST STAR TRUST, LLC	
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Principal Place of Business 2328 TENTH AVENUE NORTH, STE. 403 LAKE WORTH, FL 33461-6606	Mailing Address 2328 TENTH AVENUE NORTH, STE. 403 LAKE WORTH, FL 33461-6606
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**DO NOT WRITE IN THIS SPACE**



04062005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1148749	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  RUKIN, ROGER 2328 TENTH AVENUE NORTH, STE. 403 LAKE WORTH, FL 33461-6606
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**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: \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JAMES B RUKIN REVOCABLE TRUST 2328 10TH AVE. NO. STE 403 LAKE WORTH, FL 334616606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JULIA R. RUKIN REVOCABLE TRUST 2328 10TH AVE. NO STE 403 LAKE WORTH, FL 334616606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUKIN, ROGER B 2328 10TH AVE. NO STE 403 LAKE WORTH, FL 334616606
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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 #

4/14/05 561586-0100