2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000018158

1. Entity Name

WEATHER VANE PROPERTIES LLC



Principal Place of Business

421 PARK AVENUE WORCESTER, MA 01610 Mailing Address

421 PARK AVENUE WORCESTER, MA 01610

FILED Mar 07, 2008 8:00 am Secretary of State

03-07-2008 90223 004 ***138.75



DO NOT WRITE IN THIS SPACE

01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 61-1419896 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

LEVINE, LAWRENCE A, P.A.

790 EAST BROWARD BLVD, STE 302 FORT LAUDERDALE, FL 33301

1.00

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IN	THIS	SPACE

8.,	. The above named thitty 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, a	апа ассерт
٠.	the obligations of egistered agent.		

SIGNATURE

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

6. Name and Address of Current Registered Agent

(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	MGRM
NAME	HADDAD, A. DOUGLAS
STREET ADDRESS	421 PARK AVENUE
CITY-ST-ZIP	WORCESTER, MA 01610
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
11. I hereby	certify that the information supplied with this filling does not qualify for the ex

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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.

A. Douglas, Haddad

SIGNATURE:

JRE: 7 VOCAVA

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

3/3/2008

508-755-6978

Daytime Phone #