


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000031932**

1. Entity Name  
**CENTER POINTE PROPERTY, L.L.C.**



Principal Place of Business <b>2033 MAIN STREET, STE 405          SARASOTA, FL 34237</b>	Mailing Address <b>2033 MAIN STREET, STE 405          SARASOTA, FL 34237</b>
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01302008 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>22-3885032</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**REDDING BOYD, CECILIA ESQ.  
 BRYANT & HIGBY, CHARTERED  
 833 HARRISON AVE  
 PANAMA CITY, FL 32401**

**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, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM WESTMAN, RONALD 4425 THOMAS DR PH-5 PANAMA CITY, FL 32408</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR WILSON, DON L 54892 SUNSET DR DOWAGIAC, MI 49047</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE IN THIS SPACE**

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 02/13/06-80077-009 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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:** Don L Wilson      Don L Wilson, Manager      1/30/06      269-473-1221

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