

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031932

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

2033 MAIN STREET  
SUITE 405  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2033 MAIN STREET  
SUITE 405  
SARASOTA, FL 34237

**New Mailing Address:**

**FEI Number:** 22-3885032      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILLIER, ROBERT  
2033 MAIN STREET, SUITE 405  
SARASOTA, FL 34237 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** WESTMAN, RONALD  
**Address:** 7214 WESTMORELAND DR.  
**City-St-Zip:** SARASOTA, FL 34243

**Title:** MGR  
**Name:** WILSON, DON L  
**Address:** 54892 SUNSET DR  
**City-St-Zip:** DOWAGIAC, MI 49047

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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

MGR

01/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date