

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023469

Entity Name: WEST LAKE CENTER, LLC

FILED
Feb 10, 2006
Secretary of State

Current Principal Place of Business:

490 SW VOLTAIR TERR
PORT ST LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

490 SW VOLTAIR TERR
PORT ST LUCIE, FL 34984

New Mailing Address:

FEI Number: 20-0881838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGFORD, E. C.
1715 WEST CLEVELAND STREET
TAMPA, FL 33606 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 () Delete
Name: SMITH, MACK
Address: 600 PARTRIDGE COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM () Delete
Name: MOONRAKER DEVELOPMEN, T LLC
Address: 490 SW VOLTAIR TERR
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: MGR () Delete
Name: CONFER, BILL
Address: 1110 MASON AVE
City-St-Zip: DAYTONA BEACH, FL 34145

Title: MGR () Delete
Name: HALVES, NICK
Address: 1110 MASON AVE
City-St-Zip: DAYTONA BEACH, FL 34145

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: CONFER, BILL
Address: 4100 PIUTE LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR (X) Change () Addition
Name: HALVES, NICK
Address: 4100 PIUTE LANE
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: MACK SMITH

MGRM

02/10/2006

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