

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041269

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: WEST COAST COMMUNITIES, LLC

**Current Principal Place of Business:**

6201 LEE ANN LANE  
NAPLES, FL 34109

**New Principal Place of Business:**

2395 HARMONY LANE UNIT 101  
NAPLES, FL 34109

**Current Mailing Address:**

6201 LEE ANN LANE  
NAPLES, FL 34109

**New Mailing Address:**

2395 HARMONY LANE UNIT 101  
NAPLES, FL 34109

FEI Number: 20-0350612

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHALEN, MICHAEL J  
6201 LEE ANN LANE  
NAPLES, FL 34109 US

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

PETERSEN, JERRY L  
2395 HARMONY LANE UNIT 101  
NAPLES, FL 34109 US

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: JERRY L. PETERSEN

04/29/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM (X) Delete  
Name: WHALEN, MICHAEL J  
Address: 6201 LEE ANN LANE  
City-St-Zip: NAPLES, FL 34109

Title: MGRM ( ) Delete  
Name: JACOBS, STEVE  
Address: 940 SNOWBERRY CT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM ( ) Delete  
Name: PETERSEN, JERRY L  
Address: 2395 HARMONY LANE UNIT 101  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JERRY L. PETERSEN

MGRM

04/29/2005

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