

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000051059

**FILED  
Jun 02, 2009  
Secretary of State**

**Entity Name:** WESTWOOD APARTMENTS OF ORLANDO, LLC

**Current Principal Place of Business:**

15 PARADISE PLAZA  
UNIT 352  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

15 PARADISE PLAZA  
UNIT 352  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:** 20-0492413      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MATTHEWS, TERENCE  
5190 26TH STREET WEST  
SUITE D  
BRADENTON, FL 34207 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: ARGUELLES, ELISABETH H  
Address: 2139 HYDE PARK CIRCLE  
City-St-Zip: SARASOTA, FL 34239

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

Title: MGRM (X) Delete  
Name: PROVOST, DAVIDBETH A  
Address: 5128 VASSAR LN  
City-St-Zip: SARASOTA, FL 34243

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

I hereby certify that the information supplied with this filing does not qualify 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: ELISABETH H ARGUELLES

MGRM

06/02/2009

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