

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002017

FILED
Jan 09, 2007
Secretary of State

Entity Name: WESTSIDE QUAIL FARM, LLC

Current Principal Place of Business:

126 NW 76TH DR.
SUITE A
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

126 NW 76TH DR.
SUITE A
GAINESVILLE, FL 32607

New Mailing Address:

P.O. BOX 13416
GAINESVILLE, FL 32604

FEI Number: 20-0570779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BULLARD, BARRY P
126 N.W. 76TH DR.
SUITE A
GAINESVILLE, FL 32607 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: MGR () Delete
Name: BULLARD, BARRY
Address: 126 NW 76TH DR. SUITE A
City-St-Zip: GAINESVILLE, FL 32607

Title: MGR () Delete
Name: WILDE, DOUG R
Address: 9304 SW 32ND PL
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

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 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: DOUG R. WILDE

MGR

01/09/2007

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