2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000017707

1. Entity Name
WESDAR, L.L.C.

Principal Place of Business	Mailing Address
2555 MONTCLAIRE CIRCLE WESTON, FL 33327	2555 MONTCLAIRE CIRCLE WESTON, FL 33327

DO NOT WRITE IN THIS SPACE

03162006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0822974

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GROSS, DAVID
2555 MONTCLAIRE CIRCLE
WESTON, FL 33327

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GROSS, DAVID
STREET ADDRESS	2555 MONTCLAIRE CIRCLE
CITY-ST-ZIP	WESTON, FL 33327
TITLE	MGR
NAME	JADE, AARON J
STREET ADDRESS	31800 NORTHWESTERN HIGHWAY, SUITE 207
CITY-ST-ZIP	FARMINGTON HILLS, MI 48334
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
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CITY-ST-ZIP	

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04/21/06-80009-025 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: David J Gross 3-16-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #