



FILED
Feb 14, 2007 8:00 am
Secretary of State

01-25-2007 90089 042 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000040335		
1. Entity Name 8691 WESTERN WAY, L.L.C.		
Principal Place of Business C/O EASTON, SANDERSON & CO 300 EAST STATE STREET JACKSONVILLE, FL 32226		Mailing Address C/O EASTON, SANDERSON & CO 300 EAST STATE STREET JACKSONVILLE, FL 32226
DO NOT WRITE IN THIS SPACE		
		01122007 No Chg-LLC CR2E083 (11/05)
		4. FEI Number 20-1177437
		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent DUSS, JOHN S IV FORD, JETER, BOWLUS, DUSS, MORGAN, KENNEY, SAFER 10110 SAN JOSE BOULEVARD JACKSONVILLE, FL 32257		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-electing) DATE</small>		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM EASTON, SAMUEL M JR 300 E. STATE STREET JACKSONVILLE, FL 32202	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		