2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 14, 2006 08:00 AN Secretary of State

DOCL	JME 1	VT # L	_04000	0794	69	

1. Entity Name
POINTE WEST PARTNERS, LLC

Principal Place of Business 1128 PALMA SOLA BLVD. BRADENTON, FL 34209 Mailing Address

P.O. BOX 14298 BRADENTON, FL 34280



DO NOT WRITE IN THIS SPACE

04192006No Chg-LLC CR2E083 (11/05)

 4. FEI Number
 Applied For

 20-1608444
 Not Applicable

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

GALVANO, WILLIAM S 1023 MANATEE AVENUE WEST BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE

8.	The above named entity so the obligations of registere	ent for the purpose o	f changing its reg	istered office or a	registered agent.	or both, in the S	tate of Florida.	I am familiar with,	and accept
SI	GNATURE	 		·			,		

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

9, MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERRY, BRIAN 1128 PALMA SOLA BLVD. BRADENTON, FL 34209				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANDRY, PAUL 1128 PALMA SOLA BLVD. BRADENTON, FL 34209				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NGUYEN, TRI 1128 PALMA SOLA BLVD. BRADENTON, FL 34209				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TURALBA, CORNELIUS 1128 PALMA SOLA BLVD. BRADENTON, FL 34209				
ITTLE NAME STREET ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

DO NOT WRITE IN THIS SPACE

11.	I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida S	tatutes. 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 it made under oath; that I a	m a managing member of filahager of the
	limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	

SIG	N.	ΔT	13	R	F:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-20-06

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Daytime Phone #