2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

Apr 12, 2006 8:00 am Secretary of State DOCUMENT #L04000091823 04-12-2006 90018 042 ****50 00 1. Entity Name WEST RIVERSIDE VENTURES I, LLC Principal Place of Business じしだいいっと Mailing Address 3908 WEST RIVERSIDE DRIVE 3908 WEST RIVERSIDE DRIVE FT. MYERS, FL 33901 FT. MYERS, FL 33901 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03232006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 20-2069740 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Craig R. Hersch MOYER, SUSAN R 3908 WEST RIVERSIDE DRIVE Street Address (P.O. Box Number is Not Acceptable) FT. MYERS, FL 33901 9100 College Pointe Ct Fort Myers 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 Lang KI (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGR ☐ Delete TITLE ☐ Change ■ Addition NAME MOYER, SUSAN R NAME STREET ADDRESS 3908 WEST RIVERSIDE DRIVE STREET ADDRESS CITY-ST-ZIP FT. MYERS, FL 33901 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 empreced to effect this report as required by Chapter 608, Florida Statutes.

D TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED



SHEPPARD, BRETT, STEWART, HERSCH & KINSEY P.A.

ATTORNEYS AT LAW FIRM ESTABLISHED 1924

JAY ANDREW BRETT JOHN F. STEWART + CRAIG R. HERSCH *^ D. HUGH KINSEY, JR. 9100 COLLEGE POINTE COURT FORT MYERS, FLORIDA 33919 (239) 334 - 1141 PHONE (239) 334 - 3965 FAX

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MICHAEL B. HILL OF COUNSEL

JOHN W. SHEPPARD *

* BOARD CERTIFIED: WILLS, TRUSTS & ESTATES
^ CERTIFIED PUBLIC ACCOUNTANT (FL)

+ ALSO ADMITTED IN JOWA

April 6, 2006

VIA CERTIFIED MAIL 7002 2410 0001 4458 1636

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

RE:

West Riverside Ventures, LLC West Riverside Ventures I, LLC West Riverside Ventures II, LLC West Riverside Ventures III. LLC

Dear Sir or Madam:

Enclosed, please find the four original Annual Reports for the above referenced companies. Each completed annual report includes a check in the amount of \$50.00 payable to the Florida Department of State. I understand that you will be filing these before the May 1, 2006 deadline.

Should you have any questions or comments, please do not hesitate to contact me.

Kind regards,

SHEPPARD, BRETT, STEWART, HERSCH & KINSEY, P.A.

Craig R/Hers

CRH/mkd Enclosures