2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007045

Entity Name: WEST BAY PARTNERS, LLC

FILED Feb 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O ADEVCO CORPORATION

3867 HOLCOMB BRIDGE RD. #800

NORCROSS, GA 30092

C/O ADEVCO CORPORATION

400 NORTHRIDGE ROAD, SUITE 620

ATLANTA, GA 30350

Current Mailing Address: New Mailing Address:

C/O ADEVCO CORPORATION
3867 HOLCOMB BRIDGE RD. #800
NORCROSS, GA 30092

C/O ADEVCO CORPORATION
400 NORTHRIDGE ROAD, SUITE 620
ATLANTA, GA 30350

FEI Number: 06-1738946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US

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: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 KRAXBERGER, DAVID
 Name:

 Address:
 510 STONEMOOR CIR.
 Address:

 City-St-Zip:
 ROSWELL, GA 30075
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 NEAL, WILLIAM R
 Name:

 Address:
 9435 NESBIT LAKES DR.
 Address:

 City-St-Zip:
 ALPHARETTA, GA 30022
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID M KRAXBERGER MGRM 02/27/2008