2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000045186

1. Entity Name
WESTMONTE CENTER, LLC



Principal Place of Business

241 S. WESTMONTE DRIVE, #1010 ALTAMONTE SPRINGS, FL 32714 Mailing Address

241 S. WESTMONTE DRIVE, #1010 ALTAMONTE SPRINGS, FL 32714

FILED Mar 20, 2008 8:00 am Secretary of State

03-20-2008 90179 048 ***138.75

60015953



02222008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number	
	20-2872233	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

417-772-3330

6. Name and Address of Current Registered Agent

STEPHAN, REINHARD G 241 S. WESTMONTE DRIVE, #1010 ALTAMONTE SPRINGS, FL 32714

SIGNATURE:

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the obligations of registered agent.				
OLOMATUDE				
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
. 9.	MANAGING MEMBERS/MANAGERS			
NAME STREET ADDRESS CITY-ST-ZIP	MGRM STEPHAN, MICHELLE R 241 S. WESTMONTE DRIVE, #1010 ALTAMONTE SPRINGS, FL 32714			
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.				

YPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE