## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000062971

1. Entity Name

WASHINGTON PARK ASSOCIATES, L.L.C.



FILED Feb 19, 2007 08:00 AN Secretary of State

Principal Place of Business

1432 FIRST STREET SARASOTA, FL 34236 Mailing Address

1432 FIRST STREET SARASOTA, FL 34236



02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3143491

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DRAKE, J.KEVIN ESQ DOOLEY & DRAKE, P.A. 1432 FIRST STREET SARASOTA, FL 34236

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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

Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent agent agent when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	RUTKOWSKI, DEVIN
STREET ADDRESS	1432 FIRST STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	HAYNES, JOHN
STREET ADORESS	1432 FIRST STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	CONRAD, ALLEN
STREET ADDRESS	1432 FIRST STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	DRAKE, J KEVIN
STREET ADDRESS	1432 FIRST STREET
CITY - ST - ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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11. I hereby certify that the information supplied with his 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 redeiver a ruster empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTE NA

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1Ke 2/14

941-954-7750

Daytime Phone #