

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068165

FILED  
May 01, 2007  
Secretary of State

Entity Name: MONTECITO WESTBURY MANAGEMENT COMPANY, LLC

**Current Principal Place of Business:**

7785 BAYMEADOWS WAY  
SUITE 200  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

7785 BAYMEADOWS WAY  
SUITE 200  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 20-3128294      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MAXWELL, DOUGLAS R  
10739 DEERWOOD PARK BOULEVARD  
SUITE 200-A  
JACKSONVILLE, FL 32256 US

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

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:**

Title: MGR      ( ) Delete  
Name: CONK, EDWARD W  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR      ( ) Delete  
Name: CONK, CHRISTOPHER  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR      ( ) Delete  
Name: CONK, JOELLYN  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: DOUGLAS R. MAXWELL

VP

05/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date