

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000074261

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Entity Name:** AZOR WESTGATE II LLC

**Current Principal Place of Business:**

2491 SOUTH UNIVERSITY DRIVE  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4611 SOUTH UNIVERSITY DRIVE  
#110  
DAVIE, FL 33328

**New Mailing Address:**

**FEI Number:** 20-3224321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AZOR, BETH  
11173 S.W. 37TH MANOR  
DAVIE, FL 33328 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: MGRM  
Name: AZOR, BETH  
Address: 11173 SW 37 NAR  
City-St-Zip: DAVIE, FL 33328

I hereby 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: BETH AZOR

MGRM

04/11/2011

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