

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076012

Entity Name: WESTPORT MURRELL, LLC

FILED  
Jan 04, 2006  
Secretary of State

**Current Principal Place of Business:**

931 STRATFORD PLACE  
MELBOURNE, FL 32941

**New Principal Place of Business:**

**Current Mailing Address:**

931 STRATFORD PLACE  
MELBOURNE, FL 32941

**New Mailing Address:**

FEI Number: 20-3245424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RICHARDSON, BARRY F  
931 STRATFORD PLACE  
MELBOURNE, FL 32941 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: RICHARDSON, BARRY F  
Address: 931 STRATFORD PLACE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: MGR ( ) Change (X) Addition  
Name: KENDUST, RICK  
Address: 7630 N WICKHAM RD SUITE 102  
City-St-Zip: MELBOURNE, FL 32940 US

Title: MGR ( ) Change (X) Addition  
Name: TURNER, JEAN  
Address: 149 ST CROIX AVE  
City-St-Zip: COCOA BEACH, FL 32931 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BARRY F RICHARDSON

MGR

01/04/2006

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