

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079807

Entity Name: WEST 434-930 I, LLC

FILED  
Feb 19, 2009  
Secretary of State

**Current Principal Place of Business:**

1201 HELEN ST.  
CASSELBERRY, FL 32708 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 180355  
CASSELBERRY, FL 32718 US

**New Mailing Address:**

P.O. BOX 180595  
CASSELBERRY, FL 32718 US

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

KENNEDY, LOAN B  
100 TECHNOLOGY PARK  
SUITE 170  
LAKE MARY, FL 32746 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: CASSELBERRY, MARGARET J  
Address: 1201 HELEN ST.  
City-St-Zip: CASSELBERRY, FL 32708 US

**ADDITIONS/CHANGES:**

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: MARGARET J CASSELBERRY                      MGR                      02/19/2009

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