2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035723

Address:

City-St-Zip:

CORAL GABLES, FL 33143

Entity Name: WESTERN BELTWAY ASSOCIATES, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1541 SUNSET DRIVE, SUITE 300 C/O SOUTHEAST CENTERS CORAL GABLES, FL 33143 **Current Mailing Address: New Mailing Address:** 1541 SUNSET DRIVE, SUITE 300 C/O SOUTHEAST CENTERS CORAL GABLES, FL 33143 FEI Number: 20-4718287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEVINE, TODD 1541 SÚNSET DRIVE, SUITE 300 C/O SOUTHEAST CENTERS CORAL GABLES, FL 33143 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HIGIER, GERALD M Name: Name: Address: 1541 SUNSET DRIVE, SUITE 300 Address: City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BOUCHER, MARC Name: Address: 1541 SUNSET DRIVE, SUITE 300 Address: City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: Title: MGR () Delete Title: () Change () Addition LEVINE, TODD Name: Name: 1541 SUNSET DRIVE, SUITE 300

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.

Address:

City-St-Zip:

SIGNATURE: GERALD M. HIGIER **MGRM** 04/29/2009