

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000040089

1. Entity Name
WESTMARK PROPERTIES, LLC



Principal Place of Business
3003 WEST AZEELE STREET
SUITE 200
TAMPA, FL 33609

Mailing Address
3003 WEST AZEELE STREET
SUITE 200
TAMPA, FL 33609

DO NOT WRITE IN THIS SPACE



04162008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-4710778

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HICKS, HENRY W
3003 WEST AZEELE STREET
SUITE 200
TAMPA, FL 33609

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
HICKS, HENRY W
3003 WEST AZEELE STREET, SUITE 200
TAMPA, FL 33609

TITLE
NAME
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CITY - ST - ZIP

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U000000924699
05/19/08-80011-025 138.75

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-16-08

Date

813-
876-3113

Daytime Phone #