



FILED
Mar 30, 2007 8:00 am
Secretary of State

03-16-2007 90153 025 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000119414			
1. Entity Name WEST BARTOW, L.L.C.			
Principal Place of Business 4683 EAST COUNTY ROAD 540-A LAKELAND, FL 33813		Mailing Address 4683 EAST COUNTY ROAD 540-A LAKELAND, FL 33813	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		4. FEI Number 20-8087937 Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MCQUILLEN, DUANE 4683 EAST COUNTY ROAD 540-A LAKELAND, FL 33813		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCQUILLEN, DUANE 4683 EAST COUNTY ROAD 540-A LAKELAND, FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: 		Date: 3/9/2007 863 647-1200	