

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000116552

Entity Name: WEST PALM MOTEL, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

460 LANE AVENUE SOUTH  
JACKSONVILLE, FL 32234

**New Principal Place of Business:**

1900 N KROME AVE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

460 LANE AVENUE SOUTH  
JACKSONVILLE, FL 32234

**New Mailing Address:**

1900 N KROME AVE  
HOMESTEAD, FL 33030

FEI Number: 65-0503611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, ASHOK  
460 LANE AVENUE SOUTH  
JACKSONVILLE, FL 32234 US

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

PATEL, ASHOK  
1009 MORNING STROLL LANE  
JACKSONVILLE, FL 32221 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PATEL, ASHOK  
Address: 1009 MORNING STROLL LANE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: MGRM  
Name: PATEL, NAVNIT  
Address: 2805 FAIRWAYS DR  
City-St-Zip: HOMESTEAD, FL 33035

I hereby 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: ASHOK PATEL

MGRM

04/30/2012

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