


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L95000000571 WESTVILLE DEVELOPMENT, L.C. C/O SUSAN K. BAUMEL 750 S. DIXIE HIGHWAY BOCA RATON FL 33432		1a. Principal Place of Business Address C/O SUSAN K. BAUMEL 750 S. DIXIE HIGHWAY BOCA RATON FL 33432	
2. Principal Place of Business 2000 Glades Road Suite, Apt. #, etc. Suite 400 City & State Boca Raton, Florida Zip 33431 Country U.S.	2a. Mailing Address 2000 Glades Road Suite, Apt. #, etc. Suite 400 City & State Boca Raton, Florida Zip 33431 Country U.S.	3. Date Organized or Qualified 07/25/1995 4. FEI Number 65-0596686 5. Date of Last Report 05/01/1997	3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired SB 75 Additional Fee Required <input type="checkbox"/>
7. Name and Address of Current Registered Agent SUSAN K. BAUMEL, P.A. 750 S. DIXIE HIGHWAY BOCA RATON FL 33432		8. Name and Address of New Registered Agent/Office Name Susan K. Baumel, P.A. Street Address (P.O. Box Number is Not Acceptable) 2000 Glades Road, Suite 400 Suite, Apt. #, etc. Suite 400 City Boca Raton, FL Zip Code 33431	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE <u><i>Susan K. Baumel</i></u> DATE <u>2/27/98</u> <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	Bonarrigo KIXLE , VIRGINIA	2000 Glades Rd., Suite 400 750 S. DIXIE HIGHWAY	BOCA RATON FL
MGR	LAURENZO, JOHN	750 S. DIXIE HIGHWAY 2000 Glades Rd., Suite 400	BOCA RATON FL
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11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address. SIGNATURE: <u><i>Virginia Bonarrigo</i></u> 3/31/98 (518)393-0655 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #</small>			