## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L98000003512

1. Entity Name JCD WESTGATE, L.L.C.

Principal Place of Business

3740 BEACH BOULEVARD, SUITE 300 JACKSONVILLE, FL 32207

Mailing Address

3740 BEACH BOULEVARD, SUITE 300 JACKSONVILLE, FL 32207

## FILED Apr 22, 2004 08:00 AM Secretary of State



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04202004 No Chg-LLC CF

CR2E083 (10/03)

904-398-7350

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

4/2/4

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEMETREE, JACK C 3740 BEACH BOULEVARD, SUITE 300 JACKSONVILLE, FL 32207

## 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		(NOTE. Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			04/22/04-80039-010 <b>50.</b> 00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CHY-SY-ZIP	MGRM DEMETREE, JACK C 3740 BEACH BOULEVARD, SUITE 300 JACKSONVILLE, FL 32207		
title Name Street address City-St-2ip			
TATLE NAME STREET ADDRESS CITY-SI-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CRYY-ST-ZIP		IN	THIS SPACE
TRILE NAME STREET ADDRESS CRY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under path; 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.			