2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000001381 WESTVIEW PLAZA, L.C. Principal Place of Business Mailing Address 3073 SOUTH HORSESHOE DRIVE, STE 118 3073 SOUTH HORSESHOE DRIVE, STE 118 NAPLES, FL 34104 NAPLES, FL 34104 DO NOT WRITE IN THIS SPACE

FILED Mar 08, 2007 8:00 am Secretary of State

03-08-2007 90188 045 ****50.00

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02212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
59-3561526		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

Fee Required

6.	Name	and A	ddress (of Cu	rrent	Reg	isterec	i Agen	ŧ
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CH	IARD								
			<u> </u>		CLU	T C	440		

VETTER, RI 3073 SOUTH HORSESHOE DRIVE, SUITE 118 NAPLES, FL 34104

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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	
Fi Di	ling Fee is \$50.00 ue by May 1, 2007			
9	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VETTER, RICHARD 3073 SOUTH HORSESHOE DRIVE, SUITE 118 NAPLES, FL 34104			
TITLE NAME STREET ADORESS CITY-ST-ZIP				
TITLE NAME , STREET ADDRESS CITY-ST-ZIP		DO NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicated	certify that the information supplied with this Wing does not on this report is true and accurate and that my signature s	qualify for the exemptions contained in Chapter 119, Florida Statutes, hall have the same legal effect as if made under oath; that I am a ma	I further certify that the information naging member or manager of the	

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

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