


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 05, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L99000007998</b> 1. Entity Name WESTLAND ENTERPRISES, L.L.C.	
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Principal Place of Business 12451 METRO PARKWAY SUITE 101 FORT MYERS, FL 33912	Mailing Address 12451 METRO PARKWAY SUITE 101 FORT MYERS, FL 33912
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**DO NOT WRITE IN THIS SPACE**



03202004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3612179	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent  ROSENBERG, DARRYL G 12451 METRO PARKWAY SUITE 101 FORT MYERS, FL 33912	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
Due by May 1, 2004**

U000000103104  
04/05/04-80043-011 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSENBERG, DARRYL G 12451 METRO PARKWAY SUITE 101 FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSENBERG, MILTON G 2010 EAST MAIN STREET ALBERT LEA, MN 56007
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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:** Darryl G. Rosenberg Mng. Member 3/20/04 (239) 495-9596  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #