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2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 02, 2005 8:00 am
Secretary of State
08-02-2005 90005 029 ****50.00

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1. Entity Name
WESTLAND ENTERPRISES, L.L.C.

20065922

Principal Place of Business	Mailing Address
12451 METRO PARKWAY SUITE 101 FORT MYERS, FL 33912	12451 METRO PARKWAY SUITE 101 FORT MYERS, FL 33912

06292005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3612179
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSENBERG, DARRYL G
12451 METRO PARKWAY
SUITE 101
FORT MYERS, FL 33912

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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 September 7, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	ROSENBERG, DARRYL G
STREET ADDRESS	12451 METRO PARKWAY SUITE 101
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	MGRM
NAME	ROSENBERG, MILTON G
STREET ADDRESS	~~2010 EAST MAIN STREET~~ 107 E. Richway Dr
CITY-ST-ZIP	ALBERT LEA, MN 56007
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 07/29/05 (239)768-1200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

DARRYL G. ROSENBERG