

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003518

Entity Name: WRI LAGUNA ISLES, LLC

FILED  
Apr 22, 2005  
Secretary of State

## Current Principal Place of Business:

C/O WEINGARTEN REALTY INVESTORS  
2600 CITADEL PLAZA DR., STE. 300  
HOUSTON, TX 77008

## New Principal Place of Business:

2600 CITADEL PLAZA DR.  
SUITE 300  
HOUSTON, TX 77008

## Current Mailing Address:

C/O WEINGARTEN REALTY INVESTORS  
2600 CITADEL PLAZA DR., STE. 300  
HOUSTON, TX 77008

## New Mailing Address:

2600 CITADEL PLAZA DR.  
SUITE 300  
HOUSTON, TX 77008

FEI Number: 20-0316517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.  
1333 N. DUVAL ST.  
TALLAHASSEE, FL 32303 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: WEINGARTEN REALTY IN, VESTORS-M CAND A CE DUFO  
Address: 2600 CITADEL PLAZA DR., STE. 300  
City-St-Zip: HOUSTON, TX 77008

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WEINGARTEN REALTY IN, VESTORS  
Address: 2600 CITADEL PLAZA DR., STE. 300  
City-St-Zip: HOUSTON, TX 77008

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JOE D. SHAFER

VP

04/22/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date