

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001653

Entity Name: FISTER WESTPORT, LLC

FILED
Apr 11, 2006
Secretary of State

Current Principal Place of Business:

2044 W. 1ST STREET
FORT MYERS, FL 33901

New Principal Place of Business:

11263 BIENVENIDA WAY
PO BOX 07341
FORT MYERS, FL 33919

Current Mailing Address:

2044 W. 1ST STREET
FORT MYERS, FL 33901

New Mailing Address:

812 LYNDON LANE
SUITE 102
LOUISVILLE, KY 40223

FEI Number: 65-1182999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISTER, PATRICK
2044 W. 1ST STREET
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

FISTER, PATRICK
11263 BIENVENIDA WAY
PO BOX 07341
FORT MYERS, FL 33919 US

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: PATRICK FISTER

04/11/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FISTER, PATRICK
Address: 2044 W. 1ST STREET
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FISTER, PATRICK
Address: 11263 BIENVENIDA WAY
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PATRICK FISTER

MGMR

04/11/2006

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