2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004728

Title:

Name:

Address:

City-St-Zip:

MGRM

() Delete

801 ARTHUR GODFREY ROAD, SUITE 600

WESTFORK INVESTORS L, LC

MIAMI BEACH, FL 33140

Entity Name: WESTFORK TOWER LLC

FILED May 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O TERRANOVA CORPORATION 801 ARTHUR GODFREY ROAD, SUITE 600 MIAMI BEACH, FL 33140 **Current Mailing Address: New Mailing Address:** C/O TERRANOVA CORPORATION 801 ARTHUR GODFREY ROAD, SUITE 600 MIAMI BEACH, FL 33140 FEI Number: 20-3420129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEARCE, PAM DEVENDORF, DANA 801 ARTHUR GODFREY ROAD, SUITE 600 801 ARTHUR GODFREY ROAD, SUITE 600 MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 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: DANA DEVENDORF 05/25/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WESTFORK PLAZA LLC. Name: Name: Address: 801 ARTHUR GODFREY ROAD, SUITE 600 Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: TOWER MEMBER (WESTFO, RK) LLC Name: Address: ONE CALIFORNIA STREET. SUITE 1400 Address: City-St-Zip: SAN FRANCISCO, CA 94111 City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: DANA DEVENDORF RA 05/25/2006