


FILE NOW: Fee after May 1, will be \$588.75

**APPROVED
AND
FILED**

1997 MAY 16 PM 12:44

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # M95000000127			
WESTMARK REALTY ADVISORS L.I.C. 865 SOUTH FIGUEROA ST. #3500 LOS ANGELES CA 90017		1a. Principal Place of Business Address 865 SOUTH FIGUEROA ST. #3500 LOS ANGELES CA 90017			
<small>If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.</small>					
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/26/1995	
City & State		City & State		DE	
Zip		Zip		4. FEI Number	
				95-3695034	
				<input type="checkbox"/> Applied For	
				<input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				05/01/1996	
				6. Certificate of Status Desired	
				<input checked="" type="checkbox"/> Not For Additional Fee Required	
7. Name and Address of Current Registered Agent			8. Name and Address of New Registered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM, 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			Suite, Apt. #, etc.		
			City		
			900002186589--5 -05/21/97--01058--018 ****588.75 FL ****588.75		
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	CLOTFELTER, RICHARD C	865 S. FIGUEROA STREET, #3		LOS ANGELES CA	
MGRM	ZARROW, STANTON H	865 S. FIGUEROA ST., #3500		LOS ANGELES CA	
MGRM	LUDWIG, BRUCE L	865 S. FIGUEROA ST., #3500		LOS ANGELES CA	
MGR	GRAY, MICHAEL J	865 S. FIGUEROA STREET, #3		LOS ANGELES CA	
MGR	DIDION, JAMES J	533 S. FREMONT AVENUE		LOS ANGELES CA	
MGR	STAFFORD, WALTER V	533 S. FREMONT AVE.		LOS ANGELES CA	
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (l), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: _____		5/2/97		213/683-4200	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>Date</small>		<small>Daytime Phone #</small>	