2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT				Jan 17, 2006 08:00 AF		
DOCUMENT # M9600000477 1. Entity Name WESTERRA MANAGEMENT, L.L.C.				Secretary	of State	
Principal Place 3030 LBJ FR STE 1450 DALLAS, TX	EEWAY	Mailing Address 3030 LBI FREEWAY STE 1450 DALLAS, TX 75234		1 NEWSKA 1/8 JEWN 2001 2200 2200 2200 2200 2200 2200 220	AN Gir in H err i (43 keu) an a u k	
DO NOT WRITE IN THIS SPA			CE	4. FEI Number 13-3916544 5. Certificate of Status Desired	083 (11/05) Applied For Not Applicable \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM % CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				DO NOT WRITE IN THIS SPACE		
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when refinalating) DATE Filling Fee is \$50.00 Due by May 1, 2006						
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGRM WB LAND INVESTMENTS, L.P. 3030 LBJ FREEWAY, LB 6, SUITE DALLAS, TX 75234			U0000038871! 01/20/06-80016	5 -020 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CXTY-ST-ZIP				÷		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my diphature 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 that ee empty and to execute this report as required by Chapter 908, Florida Statutes.

NAME STREET ADDRESS

SIGNATURE: WWW WTT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daylime Phone #