


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 28, 2004 08:00 AM**  
**Secretary of State**

|                                       |   |
|---------------------------------------|---|
| <b>DOCUMENT # M02000001031</b>        |  |
| 1. Entity Name<br>BLC-PINECASTLE, LLC |   |

|   |   |
|---|---|
| Principal Place of Business<br>330 NORTH WABASH AVENUE, SUITE 1400<br>CHICAGO, IL 60611 | Mailing Address<br>330 NORTH WABASH AVENUE, SUITE 1400<br>CHICAGO, IL 60611 |
|---|---|

**DO NOT WRITE IN THIS SPACE**



01192004No Chg-LLC CR2E083 (10/03)

|   |                                |
|---|--------------------------------|
| 4. FEI Number<br>01-0617218                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

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IN THIS SPACE**

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2004**

UN00000016246  
01/28/04-80048-003 50.00

| 9. MANAGING MEMBERS/MANAGERS                       |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | MGR<br>SCHULTE, MARK J<br>330 NORTH WABASH AVE., SUITE 1400<br>CHICAGO, IL 60611 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this 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.

**SIGNATURE:** Mark J. Schulte **Mark J. Schulte** 1/21/04 312.977.3700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #