


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2005 08:00 AM
Secretary of State

DOCUMENT # M03000000828 1. Entity Name COLONY PLACE, LLC	
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Principal Place of Business 25101 CHAGRIN BLVD., SUITE 300 C/O GOLDBERG COMPANIES, INC BEACHWOOD, OH 44122	Mailing Address 25101 CHAGRIN BLVD., SUITE 300 C/O GOLDBERG COMPANIES, INC BEACHWOOD, OH 44122
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02162005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 14-1873793	Applied For 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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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, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GOLDBERG, JORDAN A 25101 CHAGRIN BLVD., SUITE 300 BEACHWOOD, OH 44122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GOLDBERG, LARRY 25101 CHAGRIN BLVD., #300 BEACHWOOD, OH 44122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BELL, ERIC 25101 CHAGRIN BLVD., #300 BEACHWOOD, OH 44122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/14/05-80104-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:  Date: 3/10/05 Daytime Phone # _____