

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001943

**FILED**  
**Mar 01, 2005**  
**Secretary of State**

**Entity Name:** CL REALTY, L.L.C.

**Current Principal Place of Business:**

2500 WINDY RIDGE PARKWAY, SUITE 1600  
ATLANTA, GA 303395683

**New Principal Place of Business:**

**Current Mailing Address:**

2500 WINDY RIDGE PARKWAY, SUITE 1600  
ATLANTA, GA 303395683

**New Mailing Address:**

**FEI Number:** 82-0568549

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: LUMBERMEN'S INVESTME, NT CORPORATION  
Address: 1300 S. MOPAC  
City-St-Zip: AUSTIN, TX 78746

Title: MGRM ( ) Delete  
Name: COUSINS REAL ESTATE, CORP.  
Address: 2500 WINDY RIDGE PARKWAY, SUITE 1600  
City-St-Zip: ATLANTA, GA 303395683

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: KRISTIN R. MYERS, COUSINS

VP

03/01/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date