2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005737

Entity Name: CLK MULTI FAMILY MANAGEMENT, LLC

FILED May 29, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
	USAND OAKS BLVD., SUITE 3100 , TN 381182459		
Current Mailing Address:		New Mailing Address:	
	USAND OAKS BLVD., SUITE 3100 , TN 381182459		
In accordan	ce with s. 607.193(2)(b), F.S., the limited liability company o		ne prior notice.
Name and	Address of Current Registered Agent:	Name and	l Address of New Registered Agent:
1200 SOU	PORATION SYSTEM TH PINE ISLAND ROAD ION, FL 33324 US		
	named entity submits this statement for the purpose of Florida.	e of changing	its registered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	P () Delete KOENIGSBERG, CRAIG 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V () Delete KOENIGSBERG, ELAINE 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V () Delete WEINSTEIN, ROB 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V () Delete JOHNSON, LEWIS D 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	T () Delete CORDOVA, JEFF 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459	Title: Name: Address: City-St-Zip:	S/T (X) Change () Addition CORDOVA, JEFF 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459
Title: Name: Address: City-St-Zip:	S (X) Delete KASMAN, ANDREW 2650 THOUSAND OAKS BLVD., SUITE 3100 MEMPHIS, TN 381182459	Title: Name: Address: City-St-Zip:	()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LEWIS D JOHNSON VP 05/29/2007