

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Aug 25, 2008  
Secretary of State**

DOCUMENT# M06000005920

Entity Name: MEJORADO-AVENUES NORTH CENTER LLC

**Current Principal Place of Business:**

25322 CHRISANTA DRIVE  
MISSION VIEJO, CA 92691

**New Principal Place of Business:**

**Current Mailing Address:**

25322 CHRISANTA DRIVE  
MISSION VIEJO, CA 92691

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MEJORADO, ALMA  
Address: 25322 CHRISANTA DRIVE  
City-St-Zip: MISSION VIEJO, CA 92691

**ADDITIONS/CHANGES:**

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

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: ALMA MEJORADO

MGRM

08/25/2008

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