## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000105075

Entity Name: COMMONS AT ISSAQUAH, INC.

FILED Apr 27, 2009 Secretary of State

| Current Principal Place of Business:        |  |   | New Principal Place of Business:            |   |
|---|--|---|---|---|
|   | MITAGE BLVE  | )   |   |   |
| STE 100<br>TALLAHA:                         | SSEE, FL 323   | 08  |   |   |
| Current Mailing Address:                    |  |   | New Mailing Addres                          | ss:                                     |
| 1801 HED                                    | RMITAGE BLVE   | 1   |   |   |
| STE 100                                     | SSEE, FL 323   |   |   |   |
| FEI Number                                  | r: 59-3682733  | FEI Number Applied For ( )                                | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )       |
| Name and                                    | d Address of (   | Current Registered Agent:                                 | Name and Address                            | of New Registered Agent:                |
| 1200 SOU                                    | PORATION SY<br>JTH PINE ISLA<br>ION, FL 33324                      | ND ROAD   |   |   |
|   | e named entity<br>e of Florida.                                    | submits this statement for the                            | e purpose of changing its registere         | ed office or registered agent, or both, |
| SIGNATU                                     | RE:  |   |   |   |
|   | Electron   | nic Signature of Registered A                             | gent  | Date                                    |
| Election Ca                                 | mpaign Financin  | g Trust Fund Contribution ( ).                            |   |   |
| OFFICER                                     | S AND DIREC  | TORS:   | ADDITIONS/CHANG                             | ES TO OFFICERS AND DIRECTOR             |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | BENNETT, DO  | GE BLVD, STE 100  | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                   |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | SMITH, JEFFR   | GE BLVD, STE 100  | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                   |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | GRAY, LYNNE  | GE BLVD, STE 100  | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                   |
| T:41  | Р (  | ) Delete  | Title:                                      | ( ) Change ( ) Addition                 |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | TOGNARELLI,  | R DR, STE 2500  | Name:<br>Address:<br>City-St-Zip:           |   |
| Name:<br>Address:                           | TOGNARELLI,<br>191 N WACKE<br>CHICAGO, IL (<br>V (<br>LIEB, STEVEN | R DR, STE 2500<br>50606<br>) Delete<br>ACKER DR, STE 2500 | Address:                                    | ( ) 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER E. SMITH

VT

04/27/2009