2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000021967

1. Entity Name
1111 TAMIAMI TR., LLC

FILED
2004 JAN 26 PM 4:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
ONE TOWNE SQUARE SUITE 1913 SOUTHFIELD, MI 48076	ONE TOWNE SQUARE SUITE 1913 SOUTHFIELD, MI 48076

DO NOT WRITE IN THIS SPACE

01202004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
30-0017355
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SELIGMAN FLP INC.
STREET ADDRESS	ONE TOWNE SQUARE SUITE #1913
CITY-ST-ZIP	SOUTHFIELD, MI 48076
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

800025939888
01/02/04 01055-003 $150.00

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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)(i), 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: [signature] SCOTT J. SELIGMAN, PRESIDENT OF MANAGER 1/20/04 248 827-4243
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #