

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000006422

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** OPUS REAL ESTATE FL VII TO2, L.L.C.

**Current Principal Place of Business:**

10350 BREN ROAD WEST  
HOPKINS, MN 55343

**New Principal Place of Business:**

**Current Mailing Address:**

10350 BREN ROAD WEST  
HOPKINS, MN 55343

**New Mailing Address:**

**FEI Number:** 20-5890684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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/MANAGERS:**

**Title:** MGR  
**Name:** DECKAS, ANDREW C  
**Address:** 10350 BREN RD W  
**City-St-Zip:** MINNETONKA, MN 55343

**Title:** MGR  
**Name:** CAMPA, LUZ  
**Address:** 10350 BREN RD W  
**City-St-Zip:** MINNETONKA, MN 55343

**Title:** MGR  
**Name:** WADE, LAU  
**Address:** 10350 BREN RD W  
**City-St-Zip:** MINNETONKA, MN 55343

**Title:** MGR  
**Name:** WATSON, DAVID C  
**Address:** 10350 BREN RD W  
**City-St-Zip:** MINNETONKE, MN 55343

I hereby 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:** WADE LAU

VP

04/26/2010

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