

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000005112

**Entity Name:** NNN DCF CAMPUS 7, LLC

**Current Principal Place of Business:**

1551 N. TUSTIN AVENUE SUITE 470  
SANTA ANA, CA 92705

**Current Mailing Address:**

1551 N. TUSTIN AVENUE SUITE 470  
SANTA ANA, CA 92705 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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

**Authorized Person(s) Detail :**

Title            MEMBER  
Name            JOANN REDMAN REV TR DTD 4/16/96  
Address        1551 N. TUSTIN AVENUE SUITE 470  
City-State-Zip: SANTA ANA CA 92705

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TODD MIKLES

**AUTHORIZED PERSON**

**05/01/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date