

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006422

Entity Name: OPUS REAL ESTATE FL VII TO2, L.L.C.**Current Principal Place of Business:**10350 BREN ROAD WEST
MINNETONKA, MN 55343**Current Mailing Address:**10350 BREN ROAD WEST
MINNETONKA, MN 55343**FEI Number:** 20-5890684**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	VP
Name	HAUGEN, SCOTT B
Address	10350 BREN RD W
City-State-Zip:	MINNETONKA MN 55343

Title	VP, SECRETARY
Name	WATSON, DAVID C
Address	10350 BREN RD W
City-State-Zip:	MINNETONKA MN 55343

Title	VP
Name	FINN, ANDREW M
Address	10350 BREN ROAD WEST
City-State-Zip:	MINNETONKA MN 55343

Title	PRESIDENT, TREASURER
Name	LAU, WADE
Address	10350 BREN RD W
City-State-Zip:	MINNETONKA MN 55343

Title	AUTHORIZED REPRESENTATIVE
Name	DERFUS, GARY
Address	10350 BREN ROAD WEST
City-State-Zip:	MINNETONKA MN 55343

Title	VP
Name	OST, JANET M
Address	10350 BREN ROAD WEST
City-State-Zip:	MINNETONKA MN 55343

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: JANET M OST

VP

03/17/2015

Electronic Signature of Signing Authorized Person(s) Detail_____
Date