

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B090000000034

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** CNL MACQUARIE GROWTH, LP

**Current Principal Place of Business:**

450 SO. ORANGE AVENUE  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4920  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 26-3907043

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCARCELLI, LINDA A  
450 SO. ORANGE AVENUE  
ORLANDO, FL 32801 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

**GENERAL PARTNER INFORMATION:**

Document #: M09000000938  
Name: CNL MACQUARIE GROWTH GP, LLC  
Address: 450 SO. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32801

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: LINDA A SCARCELLI, AS OF MGRM OF GP

AS

03/30/2011

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date