2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # B98000000204

1. Entity Name

LASALLE ORLANDO SOUTHWEST, L.P.



Principal Place of Business

C/O JONES LANG LASALLE AMERICAS, INC. 200 E. RANDOLPH DR., 72ND FŁ. CHICAGO, IL 60601 Mailing Address

C/O JONES LANG LASALLE AMERICAS, INC. 200 E. RANDOLPH DR., 72ND FL. CHICAGO, IL. 60601 FILED Apr 30, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

04182008 No Chg-LP CR2E003 (12/06)

-	4. FEI Number			Applied For
,	36-4219743			Not Applicable
	5. Certificate of Status Desired		\$8.7	5 Additional

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	DATE
 The above named entity submits this statement for the purpose of changing its registered office or registered age the obligations of registered agent. 	ent, or both, in the State of Florida. I am familiar with, and accept
· ·	The state of the s

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner.

12.	GENERAL PARTNER INFORMATION
DOCUMENT #	F98000001926
NAME	LASALLE ORLANDO SOUTHWEST, INC.
STREET ADDRESS	200 EAST RANDOLPH, SUITE 4322
CITY-ST-ZIP	CHICAGO, IL 60601
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	,
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	•
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY_ST_7IP	

000000937439 05/27/08-80049-025 500.00

DO NOT WRITE
IN THIS SPACE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/25/68

312-228-2778

Daytime Phone #