2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000006992

City-St-Zip:

SARASOTA, FL 34237

Entity Name: 1031 QUALIFIED INTERMEDIARY, L.L.C.

FILED Mar 19, 2003 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|---|---|--------------------------------------|---|--|
| | N STREET, SU FA, FL 34237 | ITE 600 | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | N STREET, SU ΓΑ, FL 34237 | ITE 600 | | |
| FEI Number | : 59-3654728 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | |
| 2033 MAIN | ER, J. GEOFFF N STREET, SU FA, FL 34237 | ITE 600 | | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | ed office or registered agent, or both |
| SIGNATU | RE: | | | |
| | Electron | nic Signature of Registered Age | ent | Date |
| MANAGING MEMBERS/MEMBERS: | | | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | PFLUGNER, J. | REET, SUITE 600 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: | DALGAARD, TA |) Delete AMI D REET. SUITE 600 | Title: Name: Address: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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.

City-St-Zip:

SIGNATURE: J. GEOFFREY PFLUGNER MGR 03/19/2003