2005 LIMITED LIABILITY COMPANY

May 02, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # L00000011690 1. Entity Name THE FLATS ON 30-A LLC Mailing Address Principal Place of Business 2000 INTERSTATE PARK DR., STE. 400 2000 INTERSTATE PARK DR., STE. 400 MONTGOMERY, AL 36100 MONTGOMERY, AL 36100 04262005 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 63-1261901 \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CORPORATE ACCESS, INC. 236 E. 6TH AVE. TALLAHASSEE, FL 32303 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE COLONIAL REAL ESTATE INVESTMETNS, INC. NAME STREET ADDRESS 2000 INTERSTATE PARK DR. MONTGOMERY, AL 36109 CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling does not qualify 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 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.

SIGNATURE: SIGNATURE AND TYPED OR PRINT SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP

FILED