

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000749

FILED
Apr 10, 2008
Secretary of State

Entity Name: MAGDALENE CENTER OF TAMPA, LLC

Current Principal Place of Business:

2908 BAY TO BAY BLVD., SUITE 200
TAMPA, FL 33629

New Principal Place of Business:

4008 N FLORIDA AVE
TAMPA, FL 33603

Current Mailing Address:

2908 BAY TO BAY BLVD., SUITE 200
TAMPA, FL 33629

New Mailing Address:

PO BOX 7008
TAMPA, FL 33673

FEI Number: 59-3726433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCIS INVESTMENTS, INC.
2908 BAY TO BAY BLVD.
SUITE 200
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

OM VENTURES, INC.
4008 N FLORIDA AVE
TAMPA, FL 33603 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: DHARMA MALEMPATI

04/10/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OFFICE PROPERTIES OF, TAMPA, LLC
Address: 2908 BAY TO BAY BLVD., SUITE 200
City-St-Zip: TAMPA, FL 33629

Title: MGRM (X) Delete
Name: ARCIS INVESTMENTS, I, NC.
Address: 2908 BAY TO BAY BLVD., SUITE 200
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAGDALENE INVESTOR G, ROUP LLC
Address: PO BOX 7008
City-St-Zip: TAMPA, FL 33673

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: DHARMA MALEMPATI

MGR

04/10/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date