2005 LIMITED LIABILITY COMPANY

SIGNATURE:

FILED **ANNUAL REPORT** Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # L01000000877 NATIONWIDE OCOEE PLAZA, LLC Principal Place of Business Mailing Address 100 NORTH LASALLE STREET, SUITE 1111 939 LONGDALE AVE CHICAGO, IL 60602 LONGWOOD, FL 32750 01032005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 36-4272153 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HENKHAUS, BARBARA DO NOT WRITE 939 LONGDALE AVE LONGWOOD, FL 32750 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NATIONWIDE REAL ESTATE, INC. NAME STREET ADDRESS 100 N. LASALLE ST., #1111 U00000324158 CITY-ST-ZIP CHICAGO, IL 60602 04/22/05-80082-013 50.00 TITLE NAME STREET ADDRESS CITY - ST- ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my significant 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.

07-830-077c