LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L02000031876

1. Entity Name

MRA ST. CHARLES INVESTOR, LLC



FILED May 05, 2003 8:00 am Secretary of State 05-05-2003 90697 018 ****50.00

Daytime Phone #

DO NOT WRITE IN THIS SPACE		30068683
2. Principal Place of Business 900 SE 900 SE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 201 Suite, Apt. #, etc.	3rd Ave.	DO NOT WRITE IN THIS SPACE
City & State City & State Fort Landerdale PL Fort Lande	ordale, FL	4. FEI Number Applied For Not Applicable
Zip 33316 Country 33316	Country /	5. Certificate of Status Desired \$5.00 Additional Fee Required
The same of the sa		7. Name and Address of Current Registered Agent
DO NOT WRITE	Name (0 of	ley Keun M.
	Street Address (P.O. Box Number is Not Acceptable)
IN THIS SPACE	Sile	201
	City	Loudocada FL Zincoda 176
8. The above named entity submits this statement for the purpose of changing it	s registered office or register	Limited Tools
the obligations of registered agent.		
SIGNATURE Signature, uped or printed name of registered agent and title if applicable.	OFFRY MANAG	w namber 4-29-07
	FEE IS \$50.00	
	ble to Florida Departme DUE BY MAY 1	int of State
9. MANAGING MEMBERS/MANAGERS		
TITLE MGRM and	INE	
NAME Kevin M. Cottey STREET ADDRESS 900 SE 300 Ave, Suite 201	NAME Street Address	
CITY-ST-ZIP Fort Lauderdale, PL 33316	CITY-ST-ZIP	
TITLE MGRM	TITLE	
NAME John F. Walsh STREET ADDRESS 425 Bay St.	NAME STREET ADDRESS	
STREET ADDRESS 425 Bay ST. CITY-ST-ZIP Santa Monica CA 90405	CITY-ST-ZIP	
TITLE MGRM	TILE	
NAME William D. Evans	NAME	
STREET ADDRESS TO RED BITCH	STREET ADDRESS	DO NOT WRITE
TITLE LITTLE TOD, CO 80211	TITLE	
NAME	NAME	IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP	
TITLE .	TITLE	
NAME OF THE STATE	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE '	TITLE 1	and the state of t
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for indicated on this report is true and accurate and that my signature shall have limited liability company or the receiver or trustee empowered to execute this	e the same legal effect as if m	nade under oath: that I am a managing member or manager of the