2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 20, 2005 8:00 am Secretary of State **DOCUMENT # L02000033388** 04-20-2005 90039 003 ****50.00 GTA-IB CONDOMINIUM, LLC Principal Place of Business Mailing Address 701 BRICKELL AVE STE. 3000 701 BRICKELL AVE STE. 3000 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01212005 Chg-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For 16-1643904 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVE STE. 3000 MIAMI, FL 33131 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR · TITLE Delete TITI É MGR St Change ☐ Addition GTA-IB GOLF RESORT, LLC ... NAME GTA-IB Golf Resort, LLC NAME 701 BRICKELL AVE., STE 3000 STREET ADDRESS STREET ADDRESS 10N. Adger's Wharf MIAMI, FL 331631 CITY-ST-ZIP CITY-ST-ZIP Charleston, SC 29401: CEOP TITLE ☐ Delete TITLE Txt Change ☐ Addition CEOP BLAIR, BRADLEY WII NAME NAME Blair, Bradley STREET ADDRESS 701 BRICKELL AVE., STE 3000 STREET ADDRESS 10 N. Adger's Wharf CITY-ST-ZIP MIAMI, FL 331631 CITY-ST-ZIP Charleston SC 29401 TITLE VΡ ☐ Delete TITLE Change --- - Addition VP WILT. KEITH R NAME NAME Wilt, Keith R. STREET ADDRESS 701 BRICKELL AVE., STE 3000 STREET ADDRESS 10 N. Adger's Wharf CITY-ST-ZIP MIAMI, FL 331631 CITY-ST-ZIP Charleston, SC 29401 **CFOS** TITLE TITLE ☐ Delete Tr Change Addition CFOS PETERS, SCOTT D NAME NAME Peters, Scott D. STREET ADDRESS 701 BRICKELL AVE., STE 3000 STREET ADDRESS 10 N. Adger's Whart CITY-ST-7IP CITY-ST-ZIP MIAMI, FL 331631 Charleston, SC 29401 Defete TITLE TITLE Change ☐ Addition NAME CLIFFORD, TRACY S NAME Clifford, Tracy S. 701 BRICKELL AVE., STE 3000 STREET ADDRESS STREET ADDRESS 10 N. Adger's Wharf Charleston, SC 2940 CITY-ST-ZIP MIAMI, FL 331631 CITY-ST-ZIP ☐ Detete TITLE TITLE ☐ Change ☐ Addition NAME NAME 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 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.

INC MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED