


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000016078 1. Entity Name THE LOFTS SAN MARCO TENANT, LLC	
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Principal Place of Business 1450-3 SAN MARCO BLVD. JACKSONVILLE, FL 32207	Mailing Address 1450-3 SAN MARCO BLVD. JACKSONVILLE, FL 32207
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DO NOT WRITE IN THIS SPACE

04052005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 56-2356205	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SIMON, BERT C 1660 PRUDENTIAL DR., STE. 203 GARTNER, BROCK AND SIMON JACKSONVILLE, FL 32207

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAN MARCO LOFTS MANAGEMENT LLC 1450-3 SAN MARCO BLVD. JACKSONVILLE, FL 32207
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04/15/05-80067-001 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: William R. Ceryn 4/8/05 William R. Ceryn 904-396-9601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #