## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018594

City-St-Zip: MAITLAND, FL 32751

Entity Name: MAITLAND WEST ONE, LLC

FILED Mar 21, 2005 Secretary of State

| Current Principal Place of Business:        |                            |                                     | New Principal Place of Business:            |   |  |
|---|----------------------------|-------------------------------------|---|---|--|
| Current                                     | illicipai i laci           | or Business.                        | New Fillicipal Flace                        | of Busiliess.                             |  |
|   | AITLAND CEN<br>D, FL 32751 | TER PKWY.                           |   |   |  |
| Current Mailing Address:                    |                            |                                     | New Mailing Address:                        |   |  |
|   | NTLAND CEN<br>D, FL 32751  | TER PKWY.                           |   |   |  |
| FEI Number:                                 | : 90-0088011               | FEI Number Applied For ( )          | FEI Number Not Applicable ( )               | Certificate of Status Desired (X)         |  |
| Name and                                    | Address of (               | Current Registered Agent:           | Name and Address                            | Name and Address of New Registered Agent: |  |
| MAITLAND The above                          | NTLAND CEN<br>D, FL 32751  | US                                  | purpose of changing its registere           | ed office or registered agent, or both    |  |
| SIGNATUR                                    | RE:                        |                                     |   |   |  |
| Electronic Signature of Registered Agent    |                            |                                     | gent  | t Date                                    |  |
| MANAGING                                    | MEMBERS/MEM                | BERS:                               | ADDITIONS/CHANGES:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | STEIN, CLIFFO              | AND CENTER PKWY                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | BERMAN, REII               | AND CENTER PKWY                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:                 | YARMUTH, RO                | ) Delete<br>BERT<br>AND CENTER PKWY | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                   |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: CLIFFORD L. STEIN MGRM 03/21/2005