2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

May 01, 2006 8:00 am Secretary of State **DOCUMENT # L04000088454** 05-01-2006 90070 012 ****50 00 FIRST STATES INVESTORS 2017, LLC Mailing Address Principal Place of Business 1725 THE FAIRWAY 20041039 1725 THE FAIRWAY JENKINTOWN, PA 19046 JENKINTOWN, PA 19046 2. Principal Place of Business 04242006 Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For 20-1983053 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. Manager Change Addition MGR Delete TITLE TITLE First States Group, L.P. 610 010 York Road, Str. 300 SCHORSCH, NICHOLAS S NAME NAME STREET ADDRESS 1725 THE FAIRWAY STREET ADDRESS CITY-ST-ZIP JENKINTOWN, PA 19046 Jenkintown, PA CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME **BLUMENTHAL, GLENN** NAME STREET ADDRESS STREET ADDRESS 1725 THE FAIRWAY CITY-ST-ZIP JENKINTOWN, PA 19046 CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE MATEY JR, EDWARD J NAME NAME STREET ADDRESS STREET ADDRESS 1725 THE FAIRWAY JENKINTOWN, PA 19046 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE MGR HUFFMAN, SONYA A MARKE NAME STREET ADDRESS STREET ADDRESS 1725 THE FAIRWAY CITY-ST-ZIP JENKINTOWN, PA 19046 CITY-ST-ZIP Change MGR Delete ☐ Addition TITLE RATNER, JAMES T NAME NAME STREET ADDRESS 1725 THE FAIRWAY STREET ADDRESS CITY-ST-ZIP JENKINTOWN, PA 19046 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

BER, CANAGER, OR AUTHORIZED REPRESENTATIVE

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