

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010460

FILED
Apr 24, 2007
Secretary of State

Entity Name: CINNAMON TREE PROFESSIONAL PARK, LLC

Current Principal Place of Business:

2684 WHARTON CIRCLE
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

1490 SUNSHADOW DR.
SUITE 2020
CASSELBERRY, FL 32707 US

Current Mailing Address:

P O BOX 15361
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUHLMANN, JOHN H
2684 WHARTON CIRCLE
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

KUHLMANN, JOHN H
1490 SUNSHADOW DR.
SUITE 2020
CASSELBERRY, FL 32707 US

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.

SIGNATURE: JOHN H KUHLMANN

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KUHLMANN, JOHN H
Address: 2684 WHARTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KUHLMANN, JOHN H
Address: 1490 SUNSHADOW DR. , SUITE 2020
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGR () Change (X) Addition
Name: EWEN, ANTHONY
Address: 1490 SUNSHADOW DR., SUITE 2010
City-St-Zip: CASSELBERRY, FL 32707 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: JOHN H KUHLMANN

MGR

04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date