

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066254

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** BOCA GRANDE CLUB UNIT 38-A, LLC

**Current Principal Place of Business:**

222 N. LASALLE STREET, SUITE 800  
CHICAGO, IL 60601

**New Principal Place of Business:**

**Current Mailing Address:**

222 N. LASALLE STREET, SUITE 800  
CHICAGO, IL 60601

**New Mailing Address:**

**FEI Number:** 20-5130299

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GLERUM, JAMES T  
Address: 222 N. LASALLE STREET, SUITE 800  
City-St-Zip: CHICAGO, IL 60601

Title: MGRM ( ) Delete  
Name: GLERUM, CHARLES  
Address: 222 N. LASALLE STREET, SUITE 800  
City-St-Zip: CHICAGO, IL 60601

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: GLERUM, CHARLES  
Address: CHOATE, HALL & STEWART/TWO INTERNATIONAL PL.  
City-St-Zip: BOSTON, MA 02110

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: JAMES T GLERUM

MGRM

04/27/2007

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