

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080871

Entity Name: METCALF MEMBER, LLC

FILED  
Jan 11, 2007  
Secretary of State

## Current Principal Place of Business:

100 S. ORANGE AVE.  
SUITE 200  
ORLANDO, FL 32801

## New Principal Place of Business:

## Current Mailing Address:

100 S. ORANGE AVE.  
SUITE 200  
ORLANDO, FL 32801

## 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:

MADSON, TORBEN S III  
100 S. ORANGE AVE.  
SUITE 200  
ORLANDO, FL 32801 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: MGR ( ) Delete  
Name: ALVAREZ, P. RAUL JR.  
Address: 100 S. ORANGE AVE. #200  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: SAMBOL, STEPHEN B  
Address: 100 S. ORANGE AVE. #200  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: WINTHROP, GRIFFITH J III  
Address: 100 S. ORANGE AVE. #200  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: MADSON, TORBEN S III  
Address: 100 S. ORANGE AVE. #200  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GRIFFITH J. WINTHROP, III

MGR

01/11/2007

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