2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095494

Entity Name: MOWREY PLAZA I, LLC

City-St-Zip:

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1111 KANE CONCOURSE, STE 401F BAY HARBOR ISLANDS, FL 33154 **Current Mailing Address: New Mailing Address:** 1111 KANE CONCOURSE, STE 401F BAY HARBOR ISLANDS, FL 33154 FEI Number: 20-5622011 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAKOWITZ, ALAN 1111 KANE CONCOURSE, STE 401F BAY HARBOR ISLANDS, FL 33154 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: ADDITIONS/CHANGES: () Delete Title: MGRM () Change (X) Addition SAKOWITZ, ALAN Name: Name: Address: Address: 1111 KANE CONCOURSE SUTE401F City-St-Zip: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 Title: Title: MGRM () Change (X) Addition () Delete Name: Name: EGOZI, MAURICE Address: Address: 1111 KANE CONCOURSE SUTE401F City-St-Zip: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 Title: () Delete Title: MGRM () Change (X) Addition Name: ADAMS, THOMAS Name: 10946 CROSS CREEK BOULEVARD SUITE 316 Address: Address:

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.

City-St-Zip:

TAMPA, FL 33647

SIGNATURE: ALAN SAKOWITZ MGRM 01/18/2007