

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118181

FILED
Apr 29, 2008
Secretary of State

Entity Name: PINES APTS, LLC

Current Principal Place of Business:

320 NORTH MAIN STREET, SUITE 200
ANN ARBOR, MI 48104

New Principal Place of Business:

Current Mailing Address:

320 NORTH MAIN STREET, SUITE 200
ANN ARBOR, MI 48104

New Mailing Address:

FEI Number: 38-2965366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALEITA, GARY M
215 NORTH EOLA DRIVE
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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: G () Change (X) Addition
Name: MCKINLEY ASSOCIATE,, INC.
Address: 320 N. MAIN STREET, SUITE 200
City-St-Zip: ANN ARBOR, MI 48104 US

Title: G () Change (X) Addition
Name: WEISER, RONALD
Address: 320 N. MAIN STREET, SUITE 200
City-St-Zip: ANN ARBOR, MI 48104 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: LESLIE L SMITH

CFO

04/29/2008

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