2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# L09000034113

Entity Name: CNL SP PLAZA PARTNERS MEMBER, LLC

Current Principal Place of Business:

450 S. ORANGE AVENUE
ORLANDO, FL 328013336

New Principal Place of Business:

Current Mailing Address:

450 S. ORANGE AVENUE
ORLANDO, FL 328013336

New Mailing Address:

PO BOX 4920
ORLANDO, FL 32802

FEI Number: 26-4723738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCARCELLI, LINDA A
450 S. ORANGE AVENUE
ORLANDO, FL 328013336 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: P
Name: BOURNE, ROBERT A
Address: 450 S ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: HYLTIN, ANDREW
Address: 450 S ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: T
Name: SCHMIDT, TRACY G
Address: 450 S ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: CEO
Name: SENEFF, JAMES M JR
Address: 450 S ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: S
Name: SCARCELLI, LINDA A
Address: 450 S ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: AT
Name: TIPTON, TAMMY
Address: 450 S ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

I hereby 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 Statues.

SIGNATURE: LINDA A SCARCELLI S 03/30/2010

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