2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000003575

1. Entity Name COMMONS PT. CHARLOTTE I, L.C.



FILED Apr 30, 2004 08:00 AM Secretary of State

Principal Place of Business

2600 TECHNOLOGY DRIVE, SUITE 200 ORLANDO, FL 32804

Mailing Address

2600 TECHNOLOGY DRIVE, SUITE 200 ORLANDO, FL 32804



03252004 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number	 _	Applied For
	59-3583119		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

KANAN, BRADFORD S 2600 TECHNOLOGY DR STE 200 ORLANDO, FL 32804

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8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE			
Fi D	iling Fee is \$50.00 ue by May 1, 2004					
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR KANAN, BRADFORD S 2600 TECHNOLOGY DRIVE, SUITE 200 ORLANDO, FL 32804					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, (1967-1994) (1994) 1993: Michelle (1994) (1994) (1994) (1994)			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

11. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 AND TYPED OR HINDED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE