

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000006956

FILED
Apr 22, 2009
Secretary of State

Entity Name: CHANCELLORY BUSINESS PARK, LLC

Current Principal Place of Business:

1801 HERMITAGE BOULEVARD, SUITE 600
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1801 HERMITAGE BOULEVARD, SUITE 600
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 59-3606993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 () Delete
Name: WARRIOR, DEXTER B
Address: 3424 PEACHTREE RD NE 800
City-St-Zip: ATLANTA, GA 30326 US

Title: T () Delete
Name: LATHEM, LORI Q
Address: 3424 PEACHTREE RD NE 800
City-St-Zip: ATLANTA, GA 30326 US

Title: S () Delete
Name: NEWMARK, DEBBIE J
Address: 3424 PEACHTREE RD NE 800
City-St-Zip: ATLANTA, GA 30326 US

Title: A () Delete
Name: GRAY, LYNNE M
Address: 1801 HERMITAGE BLVD
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: A () Delete
Name: SMITH, JEFFREY L
Address: 1801 HERMITAGE BLVD.
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: MGRM () Delete
Name: STATE BOARD OF ADMINISTRATION OF FLORIDA
Address: 1801 HERMITAGE BOULEVARD, SUITE 600
City-St-Zip: TALLAHASSEE, FL 32308 US

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: WARRIOR, DEXTER B
Address: 3424 PEACHTREE RD NE 900
City-St-Zip: ATLANTA, GA 30326 US

Title: T (X) Change () Addition
Name: LATHEM, LORI Q
Address: 3424 PEACHTREE RD NE 900
City-St-Zip: ATLANTA, GA 30326 US

Title: S (X) Change () Addition
Name: NEWMARK, DEBBIE
Address: 3424 PEACHTREE RD NE 900
City-St-Zip: ATLANTA, GA 30326 US

Title: A (X) Change () Addition
Name: GRAY, LYNNE M
Address: 1801 HERMITAGE BOULEVARD, SUITE 600
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: S (X) Change () Addition
Name: SMITH, JEFFREY L
Address: 1801 HERMITAGE BOULEVARD, SUITE 600
City-St-Zip: TALLAHASSEE, FL 32308 US

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

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: STATE BOARD OF ADMN OF FLORIDA

MGR

04/22/2009

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