LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000000425

1. Entity Name

Opus Real Estate National IV FL, L.L.C.



DO NOT WRITE IN THIS SPACE

Minnetonka, N Zip 55343	Country USA	Minnetonka, Zip 55343	Country USA	59-3628915 5. Certificate of Status Desired	<u> </u>	Not Applicable \$5.00 Additional
City & State		City & State		4. FEI Number 59-3628915 App		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
10350 Bren R		10350 Bren Road West				

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Re	gistered A	gent
Name Corporation Service Company		
Street Address (P.O. Box Number is Not Acceptable)		
1201 Hays Street	•	
City Tallahassee	FL	Zip Code 32301-2525

03 AUG 29 PM 4: 33

	a named entity submits this statement for the purpose of changing tions of registered agent. Signature, typed or printed name of registered agent and title happilicable.	its registered office or registered agent, or both, in the second office or registered agent, or both, in the second of the seco	he State of Florida. I am familiar with, and accept
	Make Check Paya	FEE IS \$50.00 able to Florida Department of State DUE BY MAY 1	
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME	MGR Keith P. Bednarowski	TITLE NAME STREET ADDRESS TO THE TANDRESS TO THE TANDRE	,

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Keith P. Bednarowski 10350 Bren Road, Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	NX.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGŔ Andrew C. Deckas 10350 Bren Road, Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500022667945
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Ronald Schiferl 10350 Bren Road, Minnetonka, MN 55343	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify 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 preserved to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

ANDREW C. DECKAS

ACCOUNT NO. : 07210000032

REFERENCE :

224200

4368272

AUTHORIZATION

COST LIMIT

ORDER DATE: August 29, 2003

ORDER TIME : 11:41 AM

ORDER NO. : 224200-005

CUSTOMER NO: 4368272

CUSTOMER: Ms. Terrie A. Williams Hill Ward & Henderson Suite 3700, Barnett Plaza 101 East Kennedy Boulevard

Tampa, FL 33602

ANNUAL REPORT FILING

OPUS REAL ESTATE NATIONAL IV

FL, L.L.C.

XX	ANNUAL	REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret-EXT#1149

EXAMINER'S INITIALS: