2003 LIMITED LIABILITY COMPANY

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # M0000000512

LAKES AT WELLEBY INVESTORS LLC



Principal Place of Business Mailing Address 1764 SAN DIEGO AVENUE 1764 SAN DIEGO AVENUE SAN DIEGO CA 92110 ATTN: LEGAL DEPT SAN DIEGO CA 92110 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number

FILED Jan 29, 2003 8:00 am **Secretary of State**

01-29-2003 90054 029 ****85.00

20019772



CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

Country

7. Name and Address of New Registered Agent					
Name					
Street Addr	ess (P.O. Box Numb	er is Not Acce	ptable)		
City			FL	Zip Code	
d office or rec	iotorad agent, or be	th in the State	of Florida Lam for	niliar with and ac	

8. The above named entity submits this statement for the purpose of changing its registered office the obligations of registered agent.

Country

Zip

Signature, typed or printed name of registered agent and title if applicable.

Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003

9.	MANAGING MEMBERS/MANAGERS	10.	ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONTINENTAL AMERICA PROPERTIES LTD 1764 SAN DIEGO AVENUE SAN DIEGO CA 92110	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 feceive or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

E.Scott Dupree, Vice President of

OR AUTHORIZED REPRESENTATIVE

⊂General=Partner of SIGNATURE:

297-6771