

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90411 043 ****50.00

DOCUMENT # M00000000893

1. Entity Name
OSCEOLA COUNTY APARTMENTS PHASE 1A, L.L.C.



Principal Place of Business
**200 WEST MADISON STREET, 37TH FLOOR
CHICAGO, IL 60606**

Mailing Address
**200 WEST MADISON STREET, 37TH FLOOR
CHICAGO, IL 60606**

24074158



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03042004

Chg-LLC

CR2E083 (10/03)

City & State

City & State

4. FEI Number

36-4367512

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME PRITZKER RESIDENTIAL EQUITIES, L.P.
STREET ADDRESS 200 WEST MADISON STREET, 37TH FLOOR
CITY-ST-ZIP CHICAGO, IL 60606

TITLE MGRM ☒ Change ☐ Addition
NAME PRITZKER RESIDENTIAL EQUITIES, L.P.
STREET ADDRESS 200 WEST MADISON STREET, 37TH FLOOR
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Delete
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CITY-ST-ZIP

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

By: **Pritzker Residential Equities, L.P., a Delaware limited partnership, the sole member**

By: **PRE GP, Inc., a Delaware corporation, the sole general partner**

SIGNATURE:

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

Date

Daytime Phone #

John Kevin Poorman, Vice President

4-14-04