

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002601

FILED
Jan 22, 2008
Secretary of State

Entity Name: USRP (SFGP), LLC

Current Principal Place of Business:

450 SOUTH ORANGE AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

450 SOUTH ORANGE AVENUE
11TH FLOOR
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 41-1541630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOOLJAR, DEVI M
450 SOUTH ORANGE AVENUE
ORLANDO, FL 32801 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: MGR () Delete
Name: KOWALSKE, DARREN A
Address: 8377 E. HARTFORD DR.
City-St-Zip: SCOTTSDALE, AZ 85255

Title: MGR () Delete
Name: PEREZ, DAMIAN A
Address: 445 BROAD HOLLOW ROAD
City-St-Zip: MELVILLE, NY 11747

Title: MGR () Delete
Name: GEOGHEGAN, RODERICK J JR.
Address: 445 BROAD HOLLOW ROAD
City-St-Zip: MELVILLE, NY 11747

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: TROTTER, BRADLEY
Address: 8377 E. HARTFORD DRIVE
City-St-Zip: SCOTTSDALE, AZ 85255

Title: VP (X) Change () Addition
Name: MILLS, ROSEMARY Q
Address: 450 S. ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: VP () Change (X) Addition
Name: FARREN, JOHN L
Address: 450 S. ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32801

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: ROSEMARY Q. MILLS

VP

01/22/2008

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