2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

OS APR 14 AM 8: 42 DOCUMENT # M01000000202 LIGHTSPEED AT BEACON TRADEPORT (PARCEL 3) LLC Principal Place of Business Mailing Address 5080 SPECTRUM DRIVE, SUITE 1050-E 5080 SPECTRUM DRIVE, SUITE 1050-E ADDISON, TX 75001 ADDISON, TX 75001 04072005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2290226 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM LIGHTSPEED AT BEACON TRADEPORT LLC NAME STREET ADDRESS 5080 SPECTRUM DRIVE, SUITE 1050-E ADDISON, TX 75001 CITY - ST - ZIP 500051388345 04/20/05--01044--001 **50.00 TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Timothy B. Smith, Vice President & Secretary og MGRM

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

4-<u>7-</u>05

972-980-2200

Daytime Phone #

SIGNATURE: