

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000000233

1. Entity Name
SLP HOUSING II LLC



FILED
04 MAY 10 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1 CUNAMERICA CENTER
37TH FLOOR
LOS ANGELES, CA 90067-6022

Mailing Address
1 CUNAMERICA CENTER
37TH FLOOR
LOS ANGELES, CA 90067-6022

2. Principal Place of Business
1 SunAmerica Center

3. Mailing Address
1 SunAmerica Center

Suite, Apt. #, etc.
37th Floor

Suite, Apt. #, etc.
37th Floor

City & State
Los Angeles CA

City & State
Los Angeles CA

Zip
90067-6022

Country

Zip
90067-6022

Country

05052004 Chg-LLC CR2E083 (10/03)

4. FEI Number
88-0406388

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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 September 8, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE P ☒ Delete
NAME BELARDI, JAMES R
STREET ADDRESS 1 SUNAMERICA CENTER
CITY-ST-ZIP LOS ANGELES, CA 900676022

TITLE V ☒ Delete
NAME GAMSIN, MARC H
STREET ADDRESS 1 SUNAMERICA CENTER
CITY-ST-ZIP LOS ANGELES, CA 900676022

TITLE S ☒ Delete
NAME NIXON, CHRISTINE A
STREET ADDRESS 1 SUNAMERICA CENTER
CITY-ST-ZIP LOS ANGELES, CA 900676022

TITLE S ☒ Delete
NAME PUZON, VIRGINIA N
STREET ADDRESS 1 SUNAMERICA CENTER
CITY-ST-ZIP LOS ANGELES, CA 900676022

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE SunAmerica Investments, Inc. ☒ Change ☐ Addition
NAME 1 SunAmerica Center
STREET ADDRESS 37th Floor
CITY-ST-ZIP Los Angeles CA 90067-6022

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 600035828756

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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.

SIGNATURE:

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

Michael L. Fowler

Authorized Agent

5/6/2004 310-772-6000

Date

Daytime Phone #



CORPORATION SERVICE COMPANY

M01000000233

ACCOUNT NO. : 072100000032

REFERENCE : 627694 7164167

AUTHORIZATION : *Patricia Pizeto*

COST LIMIT : \$ 50.00

ORDER DATE : May 7, 2004

ORDER TIME : 9:41 AM

ORDER NO. : 627694-005

CUSTOMER NO: 7164167

CUSTOMER: Ms. Vivian Munoz
Sunamerica Affordable Housing
One Sunamerica Center
Century City
Los Angeles, CA 90067

BK

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: SLP HOUSING II LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - Ext. 2935

EXAMINER'S INITIALS:

RECEIVED
04 MAY 10 AM 10:40
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA