2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# M01000000400

Entity Name: HOMETOWN UNIVERSITY LAKES, L.L.C.

Current Principal Place of Business:

150 N. WACKER DRIVE
SUITE 2800
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

150 N. WACKER DRIVE
SUITE 2800
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-4196688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: HOMETOWN RESIDENTIAL, MANAGER, L.L. C .
Address: 150 N. WACKER DR. STE 2800
City-St-Zip: CHICAGO, IL 60606

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

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Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: CEO ( ) Change (X) Addition
Name: CLINE, JR., RICHARD G
Address: C/O HTA, 150 N WACKER DR SUITE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: PRES ( ) Change (X) Addition
Name: O'BERRY, GREGORY A
Address: C/O HTA, 150 N WACKER DR SUITE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: CIO ( ) Change (X) Addition
Name: ZILIS, PATRICK C
Address: C/O HTA, 150 N WACKER DR SUITE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: SVP ( ) Change (X) Addition
Name: BRAUN, STEPHEN H
Address: C/O HTA 150 N WACKER DR SUITE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: T,AS ( ) Change (X) Addition
Name: CURATOLO, THOMAS
Address: C/O HTA 150 N WACKER DR SUITE 2800
City-St-Zip: CHICAGO, IL 60606 US

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: JEREMY MITCHELL, AUTHORIZED AGENT MGR 04/11/2008

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