### 2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

### **DOCUMENT # M01000000880**

1. Entity Name SPI INVESTMENT X LLC



Principal Place of Business

2390 EAST CAMELBACK ROAD, SUITE 210 PHOENIX, AZ 85016

Mailing Address

2390 EAST CAMELBACK ROAD, SUITE 210 PHOENIX, AZ 85016

FILED

04 JAN 16 AM 9:07

SECRETARY OF STATE TALLAHASSEE, FLORIDA



01062004 No Chg-LLC

CR2E083 (10/03)

Applied For 4. FEI Number 94-3394716 Not Applicable \$5.00 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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<ol><li>The above named entity submits this statement for the purpose of cha the obligations of registered agent.</li></ol>	inging its registered office or registered agent, or both, in the	ne State of Florida. I am familiar with, and accept
Signature. Signature, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00		

### Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STRATEGIC PROPERTY INVESTMENTS, INC 2390 E CAMELBACK RD STE 210 PHOENIX, AZ 85016
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11. Lhereby	certify that the information supplied with this filling does not qualify for the exe

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## DO NOT WRITE IN THIS SPACE

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:

Karin A. Church, V.P.

1/6/04

602-850-8627

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

Daytime Phone #