## 2004 LIMITED LIABILITY COMPANY

## Feb-93, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # M01000000884 1. Entity Name SUH TALLAHASSEE, L.L.C. Principal Place of Business Mailing Address 6363 WOODWAY, STE. 1000 .6363 WOODWAY, STE. 1000 HOUSTON, TX 77057 HOUSTON, TX 77057 01062004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 76-0684434 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME DMC DEVELOPERS I, LTD STREET ADDRESS 6363 WOODWAY SUITE 1000 HOUSTON, TX 77057 CITY-ST-ZIP U000000031724 02/04/04-80160-007 50.00 IIILE NAME STREET ADDRESS CUY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME 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 1 19.07(3)(f). Florida Statutes. I further certify that the information indicated on this report is frue 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 receives or trustee employeed to execute this report as required by Chapter 608, Florida Statutes.

HUSMANN, CFO

SIGNATURE:

113,570.0300 Davime Phone #

**FILED**