2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M02000001538

1. Entity Name ARLINGTON PORT MEIRION, LLC

Principal Place of Business

2117 SECOND AVENUE NORTH BIRMINGHAM, AL 35203 Mailing Address

2117 SECOND AVENUE NORTH BIRMINGHAM, AL 35203

FILED Mar 15, 2004 08:00 AM Secretary of State



03032004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number	 Applied For
74-3047869	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR ALT

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

SIGNATURE:

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	, ,		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
F D	iling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		U00000089730
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARLINGTON PROPERTIES, INC. 2117 SECOND AVENUE NORTH BIRMINGHAM, AL 35203		000000089730 03/15/04-80102-025_50,00
TITLE NAME STREET ADDRESS CITY-SI-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS GITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
indicated	certify that the information supplied with this filing does not out on this report is true and accurate and that my signature shability company of the receiver of trustee empowered to exect	Il have the same legal effect as if made under oath.	that I am a managing member or manager of the

ORIZED REPRESENTATIVE

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