2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2008 08:00 A
Secretary of State

DOCUMENT # M03000000834

1. Entity Name
COLONIAL GRAND, LLC

Principal Place of Business
C/O GOLDBERG COMPANIES, INC.
25101 CHAGRIN BLVD., SUITE 300
BEACHWOOD, OH 44122

Mailing Address
C/O GOLDBERG COMPANIES, INC.
25101 CHAGRIN BLVD., SUITE 300
BEACHWOOD, OH 44122

DO NOT WRITE IN THIS SPACE

02212008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
14-1873802

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional 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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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 _____

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

000000862639
04/03/08-80055-025 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GOLDBERG, LARRY
STREET ADDRESS	25101 CHAGRIN BLVD., SUITE 300
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	MGR
NAME	GOLDBERG, JORDAN A
STREET ADDRESS	25101 CHAGRIN BLVD., SUITE 300
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	MGR
NAME	BELL, ERIC
STREET ADDRESS	25101 CHAGRIN BLVD., SUITE 300
CITY-ST-ZIP	BEACHWOOD, OH 44122
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: X LARRY GOLDBERG, MGR. X 3/10/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #