

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002233

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: CNL RETIREMENT MA4 GP ST. CHARLES IL, LLC

## Current Principal Place of Business:

450 S. ORANGE AVENUE  
ORLANDO, FL 32801

## New Principal Place of Business:

420 S. ORANGE AVENUE  
SUITE 500  
ORLANDO, FL 32801

## Current Mailing Address:

450 S. ORANGE AVENUE  
SUITE 200, ATTN: AMY PATTERSON  
ORLANDO, FL 32801

## New Mailing Address:

420 S. ORANGE AVENUE  
SUITE 500  
ORLANDO, FL 32801

FEI Number: 20-0103025

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATTERSON, AMY J  
450 S. ORANGE AVENUE  
SUITE 200  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

PATTERSON, AMY J  
420 S. ORANGE AVENUE  
SUITE 500  
ORLANDO, FL 32801 US

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:

04/25/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ANGELO, BERNARD J  
Address: 445 BROAD HOLLOW ROAD  
City-St-Zip: MELVILLE, NY 11747

Title: MGR ( ) Delete  
Name: BOURNE, ROBERT A  
Address: 450 S. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32801

Title: MGR ( ) Delete  
Name: SENEFF, JAMES M JR  
Address: 450 S. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT A. BOURNE

MGR

04/25/2006

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