2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

Sep 08, 2004 08:00 AM Secretary of State **DOCUMENT # M03000002655** THE PARK APARTMENTS, LLC Principal Place of Business Mailing Address 2040 HIGHLAND AVE. SOUTH, STE. 1600 2040 HIGHLAND AVE. SOUTH, STE. 1600 BIRMINGHAM, AL 35205 BIRMINGHAM, AL 35205 07092004No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0076222 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NRAI SERVICES, IN C. DO NOT WRITE 526 E PARK AVENUE TALLAHASSEE, FL 32301 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 Signature, typed or printed name of registered agent and title if applicable, (NOTE, Registered Agent signature required when reinstating) Filing Foo is \$50.00 Due by September 8, 2004 U00000171847 09/08/04-80008-007 55.00 MANAGING MEMBERS/MANAGERS 9. MGR TITLE SOUTHSIDE V, LLC NAME STREET ADDRESS 2040 HIGHLAND AVE. SOUTH, STE. 1600 CITY-ST-ZIP BIRMINGHAM, AL 35205 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME **REET ADDRESS** ST-ZIP

reby 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 alled 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 I liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

FILED

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Daytime Phone #