## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **ANNUAL REPORT** Jan 12, 2005 08:00 AM **Secretary of State DOCUMENT # M03000002655** 1. Entity Name THE PARK APARTMENTS, LLC Mailing Address Principal Place of Business 2040 HIGHLAND AVE. SOUTH, STE. 1600 2040 HIGHLAND AVE. SOUTH, STE. 1600 BIRMINGHAM, AL 35205 BIRMINGHAM, AL 35205 CR2E083 (10/03) 01072005No Chg-LLC 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 regulfod when roinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE SOUTHSIDE V, LLC NAME 2040 HIGHLAND AVE. SOUTH, STE. 1600 STREET ADDRESS 1/00000178323 CITY-ST-ZIP BIRMINGHAM, AL 35205 01/12/05-80023-014 50.00 TITLE NAME STREET ADDRESS City-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 STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 each, 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: Charles V. Welden, III, Manager

CITY-ST-ZIP

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

VC 05 930-4500

FILED