

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003665

FILED
Feb 09, 2004
Secretary of State

Entity Name: ROSE MEZZANINE SPE GP, LLC

Current Principal Place of Business:

450 S. ORANGE AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

450 S. ORANGE AVENUE
ORLANDO, FL 32801

New Mailing Address:

P.O. BOX 4920
ORLANDO, FL 32802

FEI Number: 02-0710930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

SCARCELLI, LINDA A
450 S. ORANGE AVENUE
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: LINDA A. SCARCELLI

02/09/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HOSMER, JOHN R JR.
Address: 11121 CARMEL COMMONS BLVD., SUITE 165
City-St-Zip: CHARLOTTE, NC 28226

Title: MGR () Delete
Name: WEIGAND, STEPHEN G
Address: 11121 CARMEL COMMONS BLVD., SUITE 165
City-St-Zip: CHARLOTTE, NC 28226

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGR () Change (X) Addition
Name: GRISWOLD, JOHN A
Address: 450 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: MGR () Change (X) Addition
Name: BLOOM, BARRY A.N.
Address: 450 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: MGR () Change (X) Addition
Name: QUINLAN, TAMMIE A
Address: 450 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN A. GRISWOLD

MGR

02/09/2004

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