## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 23, 2005 08:00 AM Secretary of State

ANNUAL REPORT			Apr 23, 2005 08:00
1. Entity Name	MENT # M03000003677 AMI XIV, LLC		Secretary of State
Principal Place of Business  500 EAST NORTH STREET, SUITE F GREENVILLE, SC 29601  Mailing Address  500 EAST NORTH STREET, SUITE F GREENVILLE, SC 29601			-
DO NOT WRITE IN THIS SPACE			03222005 No Chg-LLC CR2E083 (10/03)
		CE	4. FEI Number Applied For NOT APPLICABLE Not Applied Solutional \$5.00 Additional
	Name and Address of Current Registered Agent	·	Fee Required
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		The second secon	DO NOT WRITE IN THIS SPACE
the obligation		red office or register	(when refusitating) DATE
Filing Fee is \$50.00 Due by May 1, 2005			ll00000325032 04/23/05-80001-021 50.00
9,	MANAGING MEMBERS/MANAGERS		Property of the second
NAME STREET ADDRESS	MGRM CORWIN, FREDRIS 500 EAST NORTH STREET, SUITE F GREENVILLE, SC 29601		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· ·	IN THIS SPACE
TITLE NAME STREET ADDRESS DITY-ST-ZIP			The second secon
TITLE			The same of the sa

11. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under cath; 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ACCRESS CITY-ST-ZIP

18 APRIL 2005
Date Caytime Prone #