

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003864

FILED
Apr 13, 2004
Secretary of State

Entity Name: PRIME OUTLETS MORTGAGE BORROWER GP, LLC

Current Principal Place of Business:

100 EAST PRATT ST, 19TH FLOOR
BALTIMORE, MD 21202

New Principal Place of Business:

Current Mailing Address:

100 EAST PRATT ST, 19TH FLOOR
BALTIMORE, MD 21202

New Mailing Address:

FEI Number: 03-0530955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS INC.
103 N MERIDIAN ST, LOWER LEVEL
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

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

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

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: PRIME OUTLETS MEMBER, , LLC
Address: 100 EAST PRATT STREET, 19TH FLOOR
City-St-Zip: BALTIMORE, MD 21202

Title: MGR () Change (X) Addition
Name: PRIME OUTLETS MORTGAGE BORROWER GP MEMBER
Address: 100 EAST PRATT STREET, 19TH FLOOR
City-St-Zip: BALTIMORE, MD 21202

Title: MGR () Change (X) Addition
Name: LICHTENSTEIN, DAVID
Address: 326 THIRD STREET
City-St-Zip: LAKEWOOD, NJ 08701

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: DAVID LICHTENSTEIN

MGR

04/13/2004

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