

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000375

FILED
Apr 24, 2007
Secretary of State

Entity Name: MADISON ST. PETE, LLC

Current Principal Place of Business:

1950 SUMMIT PARK DR
STE 300
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

1950 SUMMIT PARK DR
STE 300
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 55-0827459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

B&C CORPORATE SERVICES OF CENTRAL FL INC
390 N ORANGE AVE, STE 1100
ORLANDO, FL 32801 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/MANAGERS:

Title: MGRM () Delete
Name: MADISON ST. PETE I., INC.
Address: 1950 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

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

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

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Title: () Delete
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City-St-Zip:

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

ADDITIONS/CHANGES:

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

Title: DIR () Change (X) Addition
Name: PATTERSON, STEVEN W
Address: 1950 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: EVP () Change (X) Addition
Name: STEPHENS, SAMUEL C III
Address: 1950 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: EVP () Change (X) Addition
Name: BUCK, STEVEN K
Address: 1950 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: SVP () Change (X) Addition
Name: ROSS, KIMBERLY P
Address: 1950 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: SVP () Change (X) Addition
Name: WEST, GREG T
Address: 1950 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SAMUEL C STEPHENS

EVP

04/24/2007

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