

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000472

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: PAGE IV, LLC

**Current Principal Place of Business:**

333 EAST OHIO STREET, SUITE 200  
INDIANAPOLIS, IN 46204

**New Principal Place of Business:**

**Current Mailing Address:**

333 EAST OHIO STREET, SUITE 200  
INDIANAPOLIS, IN 46204

**New Mailing Address:**

FEI Number: 76-0749615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIEZ, CHARLES  
737 SOUTH INDIANA AVENUE  
ENGLEWOOD, FL 34223 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: PAGE, PETE  
Address: 1102 S. EMERSON AVENUE  
City-St-Zip: INDIANAPOLIS, IN 46203

Title: MGRM ( ) Delete  
Name: PAGE, PAUL  
Address: 333 EAST OHIO STREET, SUITE 200  
City-St-Zip: INDIANAPOLIS, IN 46204

**ADDITIONS/CHANGES:**

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

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

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: PAUL J PAGE

MGRM

04/23/2009

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