

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000506

FILED
Apr 29, 2010
Secretary of State

Entity Name: MADISON ST. PETE CONDOS, LLC

Current Principal Place of Business:

1950 SUMMIT PARK DR
STE 300
ORLANDO, FL 32810

New Principal Place of Business:

2001 SUMMIT PARK DR
STE 300
ORLANDO, FL 32810

Current Mailing Address:

1950 SUMMIT PARK DR
STE 300
ORLANDO, FL 32810

New Mailing Address:

2001 SUMMIT PARK DR
STE 300
ORLANDO, FL 32810

FEI Number: 55-0841823

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
Name: MADISON ST PETE II, INC.
Address: 2001 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: DIR
Name: WEST, GREG T
Address: 2001 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: EVPD
Name: STEPHENS, SAMUEL C III
Address: 2001 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: EVP
Name: BALTUS, RICHARD
Address: 2001 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: SVP
Name: ROSS, KIMBERLY P
Address: 2001 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

Title: S
Name: SLATER, JAMES E
Address: 2001 SUMMIT PARK DR, STE 300
City-St-Zip: ORLANDO, FL 32810

I hereby 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, III

EVPD

04/29/2010

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