2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mailing Address

400 ARTHUR GODFREY ROAD

MIAMI BEACH, FL 33140

DOCUMENT # M04000001149

1. Entity Name
CARILLON SOUTH MEZZ LLC

Principal Place of Business

MIAMI BEACH, FL 33140

400 ARTHUR GODFREY ROAD

FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90021 040 ***138.75

60031235

 \Box

03122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number

Applied Fo

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

REGISTERED AGENTS OF FLORIDA, LLC 100 SOUTHEAST SECOND STREET, SUITE 2900 MIAMI, FL 33131-2130

DO NOT WRITE IN THIS SPACE

8. The above	named entity submits this s	statement for the purpose of cha	nging its registered office or regis	stered agent, or both, in the State	of Florida. I am familiar with, and acc
the obligati	ons of registered agent.			•	

SIGNATURE_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

	MANAGENO MEMBERO MANAGERO
<u>9. </u>	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	CARILLON SOUTH HOLDCO LLC
STREET ADDRESS	400 ARTHUR GODFREY ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	•
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informat indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of limited fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

4/24/08