

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90256 018 \*\*\*\*50.00

60037000



04052007 Chg-LLC CR2E083 (12/06)

4. FEI Number **20-1152055** Applied For  Not Applicable

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

**DOCUMENT # M04000002087**  
 1. Entity Name  
**PPF INDUSTRIAL 2201-2381 STIRLING ROAD, LLC**



Principal Place of Business  
**3424 PEACHTREE ROAD N.E.  
 SUITE 800  
 ATLANTA, GA 30326-1118**

Mailing Address  
**3424 PEACHTREE ROAD N.E.  
 SUITE 800  
 ATLANTA, GA 30326-1118**

2. Principal Place of Business - No P.O. Box #  
 3. Mailing Address

Suite, Apt. #, etc.  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip Country Zip Country

**6. Name and Address of Current Registered Agent**  
**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00  
 Due by May 1, 2007**

Make check payable to  
**Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PPF INDUSTRIAL, LLC 3424 PEACHTREE ROAD N.E. ATLANTA, GA 303261118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**10. ADDITIONS/CHANGES**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 information 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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** *Gail Freeman* **Gail Freeman** **4/9/07** **404-846-1363**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

PLEASE SEE ATTACHED SIGNATURE BLOCK

ATTACHMENT

60037859

#M0400002087

ATTACHED TO 2007 FL ANNUAL REPORT FOR  
PPF INDUSTRIAL 2201-2381 STIRLING ROAD, LLC.

SIGNATURE BLOCK:

PPF Industrial 2201-2381 Stirling Road, LLC

By: PPF Industrial, LLC, its Sole Member

By: PPF OP, LP, its Sole Member

By: PPF OPGP, LLC, its General Partner

By: Prime Property Fund, LLC, its Sole Member

By: Morgan Stanley Real Estate Advisor, Inc., its Manager

By: Gail Freeman  
Gail Freeman, Assistant Secretary