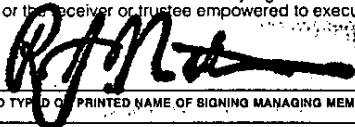


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90291 022 ****50.00

DOCUMENT # M04000002424					
1. Entity Name CROSS CREEK APARTMENTS I, LLC					
Principal Place of Business 500 SOUTH SEPULVEDA BLVD., SUITE 303 LOS ANGELES, CA 90049			Mailing Address 500 SOUTH SEPULVEDA BLVD., SUITE 303 LOS ANGELES, CA 90049		
2. Principal Place of Business 12100 WILSHIRE BLVD Suite, Apt. #, etc. #250 City & State LOS ANGELES, CA Zip 90025		3. Mailing Address 12100 WILSHIRE BLVD Suite, Apt. #, etc. #250 City & State LOS ANGELES, CA Zip 90025			
Country USA		Country USA		03232005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 010816099				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331			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, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TUSSIE, CHERYL A 103 FOULK ROAD, SUITE 101 WILMINGTON, DE 19803 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARNEY, LINDA L 103 FOULK ROAD, SUITE 101 WILMINGTON, DE 19803 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NATHAN, RICHARD 500 SOUTH SEPULVEDA BLVD., SUITE 303 LOS ANGELES, CA 90049 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	12100 WILSHIRE BLVD #250 LOS ANGELES, CA 90025 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUBUCLET, PIETRA L 500 SOUTH SEPULVEDA BLVD., SUITE 303 LOS ANGELES, CA 90049 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	12100 WILSHIRE BLVD. #250 LOS ANGELES, CA 90025 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COUVILLON, CONSTANCE E 500 SOUTH SEPULVEDA BLVD., SUITE 303 LOS ANGELES, CA 90049 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	12100 WILSHIRE BLVD. #250 LOS ANGELES, CA 90025 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 			3-22-05 310-826-7301		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		