

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004259

Entity Name: CNLRS BISMARCK ND, LLC

FILED  
Apr 21, 2005  
Secretary of State

**Current Principal Place of Business:**

450 S. ORANGE AVENUE  
ORLANDO, FL 32801

**New Principal Place of Business:**

450 S. ORANGE AVENUE  
SUITE 900  
ORLANDO, FL 32801

**Current Mailing Address:**

450 S. ORANGE AVENUE  
ORLANDO, FL 32801

**New Mailing Address:**

450 S. ORANGE AVENUE  
SUITE 900  
ORLANDO, FL 32801

FEI Number: 56-2482307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: CNLRS EQUITY VENTURE, S, INC.  
Address: 450 S. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CNLRS EQUITY VENTURE, S, INC.  
Address: 450 S. ORANGE AVENUE, STE 900  
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KEVIN B. HABICHT

DVPT

04/21/2005

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