2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # M04000004480

NNN FOUNTAIN SQUARE 21, LLC



Principal Place of Business

1551 N. TUSTIN AVE., SUITE 200 SANTA ANA, CA 92705

Mailing Address

1551 N. TUSTIN AVE., SUITE 200 SANTA ANA, CA 92705

FILED May 10, 2006 8:00 am Secretary of State

05-10-2006 90072 001 *1,300.00

30007895



04262006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-1561261		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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 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	Signature, typed or printed name of registered agent and little it applicable	(NOTE: Registered	Agent signature required when reinstating)	DATE		
Filing Fee is \$50.00 Due by May 1, 2006						
9. TITLE NAME STREET ADDRESS	MANAGING MEMBERS/MANAGERS MGR MULKIN, JOHN W., JR., TRUSTEE 37 SUNSET DRIVE, NO 73					
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SARASOTA, FL 34236 Manager Triple Net Properties, LLC 1551 North Tustin Ave. Ste #200 Santa Ana, CA 92705					
ITILE NAME STREET ADDRESS CITY-ST-ZIP			DO I	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN T	HIS SPACE		
INLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

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.

of unda Du SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Linda Dyer

4/30/06

(714)667-8252