2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 21, 2006 8:00 am Secretary of State DOCUMENT # M04000004765 02-21-2006 90180 031 ****50.00 FT-ORLANDO PROPERTY LLC Principal Place of Business Mailing Address 20009638 7 BULFINCH PLACE, SUITE 500 7 BULFINCH PLACE, SUITE 500 BOSTON, MA 02114 BOSTON, MA 02114 01232006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1810828 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS wermanajing member TITLE FT-FIN ACQUISITION LLC NAME STREET ADDRESS 7 BULFINCH PLACE, SUITE 500 BOSTON, MA 02114 CITY+ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 nustree employees to execute this ceptar is equired by Chapter 508 Florida Statutes.

GING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE AND TYPED OR PRINTED NAME OF

TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

822 O 027

Daytime Phone #

FILED