


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 28, 2008 08:00 AM
Secretary of State

| | |
|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # M04000005137 1. Entity Name IMT COLONIAL FOREST APARTMENTS LLC |  |
|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

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|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Principal Place of Business C/O INVESTORS MGMT TRUST REAL ESTATE 15303 VENTURA BLVD. STE 200 SHERMAN OAKS, CA 91403 | Mailing Address C/O INVESTORS MGMT TRUST REAL ESTATE 15303 VENTURA BLVD. STE 200 SHERMAN OAKS, CA 91403 |
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DO NOT WRITE IN THIS SPACE



01072008No Chg-LLC

CR2E083 (12/07)

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|---------------------------------|-------------------------------|
| 4. FEI Number NOT APPLICABLE | Applied For Not Applicable |
|---------------------------------|-------------------------------|

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|-----------------------------------------------------------|------------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
|-----------------------------------------------------------|------------------------------------------|

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
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) DATE

| | |
|-------------------------------------------------------------------------------------|--------------------------------------------|
| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | U000000874010 04/10/08-80090-022 138.75 |
|-------------------------------------------------------------------------------------|--------------------------------------------|

| 9. MANAGING MEMBERS/MANAGERS | |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM IMT-LB CENTRAL FLORIDA HOLDINGS, LLC 15303 VENTURA BLVD. STE 200 SHERMAN OAKS, CA 91403 |
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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:  **Cory Tharsit 3-24-08 818-784-4700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #