

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005559

**FILED**  
**Apr 04, 2009**  
**Secretary of State**

**Entity Name:** IRI CORE-GP, LLC

**Current Principal Place of Business:**

13155 NOEL ROAD, SUITE 500  
DALLAS, TX 75240 US

**New Principal Place of Business:**

3 GALLERIA TOWER 13155 NOEL ROAD STE 500  
DALLAS, TX 75240 US

**Current Mailing Address:**

13155 NOEL ROAD, SUITE 500  
DALLAS, TX 75240 US

**New Mailing Address:**

3 GALLERIA TOWER 13155 NOEL ROAD STE 500  
DALLAS, TX 75240 US

FEI Number: 20-2746812

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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: INVESCO REALTY INC.,  
Address: 13155 NOEL ROAD, SUITE 500  
City-St-Zip: DALLAS, TX 75240 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: INVESCO REALTY, INC.,  
Address: 3 GALLERIA TOWER 13155 NOEL ROAD STE 500  
City-St-Zip: DALLAS, TX 75240 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MANDELINE HENDRICKS

POA

04/04/2009

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