2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000954

Name:

Address:

City-St-Zip:

Entity Name: NET LEASE FUNDING 2005, LLC

8377 E. HARTFORD DRIVE, SUITE 200

SCOTTSDALE, AZ 85255

FILED Jan 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 450 S. ORANGE AVENUE ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 450 S. ORANGE AVENUE ORLANDO, FL 32801 FEI Number: 56-2500922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOOLJAR, DEVI M 450 S. ORÁNGE AVENUE ORLANDO, FL 32801 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ANGELO, BERNARD J Name: Name: 445 BROAD HOLLOW ROAD Address: Address: City-St-Zip: MELVILLE, NY 11747 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: KOWALSKE, DARREN A Name: Address: 8377 E. HARTFORD SRIVE, SUITE 200 Address: City-St-Zip: SCOTTSDALE, AZ 85255 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition BARRAVECCHIA, JOHN R Name: TROTTER, BRADLEY Name: 8377 E. HARTFORD DRIVE, SUITE 200 8377 E. HARTFORD DRIVE, SUITE 200 Address: Address: City-St-Zip: SCOTTSDALE, AZ 85255 City-St-Zip: SCOTTSDALE, AZ 85255 Title: MGR () Delete Title: () Change () Addition NIELSEN, GREG R

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DARREN A. KOWALSKE 01/22/2008