

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 30, 2006  
Secretary of State**

DOCUMENT# M05000001499

Entity Name: CNLRS WG LONG BEACH MS, LLC

**Current Principal Place of Business:**

450 S. ORANGE AVE.  
SUITE 900  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

450 S. ORANGE AVE.  
SUITE 900  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 11-3739187      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: MGR ( ) Delete  
Name: CNLRS EQUITY VENTURE, S, INC.  
Address: 450 S. ORANGE AVE. SUITE 900  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIAN E. WHITEHURST

EVP

03/30/2006

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