2006 LIMITED LIABILITY COMPANY

Jul 18, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # M05000003500 06-20-2006 90299 011 ****50.00 CABÓT CYPRESS CREEK TOWER 4 LLC Principal Place of Business Mailing Address 30012026 100 SUMMER STREET, 23RD FLOOR 100 SUMMER STREET, 23RD FLOOR BOSTON, MA 02111 BOSTON, MA 02111 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06012006 Chg-LLC CR2E083 (11/05) City & State City & State Applied For 4. FEI Number Not Apolicasy Not Applicable Zip \$5.00 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NRAI SERVICE, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 Street Address (P.O. Box Number is Not Acceptable) WESTON, FL 33331 City Zip Code FL 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 DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM ☐ Delete TITLE ☐ Change ■ Addition TITLE **CUSICK, TERRY B** NAME NAME STREET ADDRESS 851 N.W. 115TH AVENUE STREET ADDRESS FT. LAUDERDALE, FL 33325 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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.

TITLE NAME

STREET ADDRESS CITY-ST-7IP

☐ Delete

NATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

mie

NAME STREET ADDRESS

CITY-ST-7IP

☐ Change

☐ Addition

FILED

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #M0500003500 1. EXRY Name CABOT CYPRESS CREEK TOWER 4 LLC						Δ ናጋ ዊዎ Δ	All	^ <i>A S</i> SS A 10	
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	Race of Business	3, Mailing Address			To the second				
Sutte. Apt.		Suite, Apr. #, etc.			06012008	Chg-LLC	CR2E	:083 (11/05)	
City & State		City & State			4. FEI Number	·			polled For lot Applicable
Ζφ	Country	Zip	Coun	ntry		of Status Desired	0	\$5.00 Ad Foo Require	iditioned ed
	6. Mame and Address of Current F	Registered Agent		Name	7, Name and A	Address of New R	agintared	Agent	
2731 EXEC	IVICE, INC. CUTIVE PARK DRIVE, SUITE 4	4	i	Street Address	es (P.O. Box Number	r is Not Acceptable	1)		<u></u>
WESTON,	FL 33331		ļ						
·	named entity submits this statement for	<u>- </u>	ŀ	City			F	_ ,	
SIGNATURE	Bing Fee is \$50.00 use by May 1, 2005			of Agust Signature regul	Lined with remainings				
9. TITLE	MANAGING MEMBER	RS/MANAGERS	to.	- T		ADDITIONS/	CHANGE	3 Chance	7
NATURE STREET ADDRESS COTY-ST-ZP	CUSICK, TERRY B 851 N.W. 115TH AVENUE FT, LAUDERDALE, FL 33325	Li vau	STRE	- 1				<u>`</u> ∪ væge	□ Addition
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TITLE NAME STREET ACCRESS CITY-ST-ZP		☐ Deletes		10.0	ACCOUNT	SD. C	2	G Glarge	C) Addition
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TITLE MANE STREET ADDRESS CITY-ST-209		□ Octob						Change	Addition
TITUE NAME STREET ADDRESS CITY-ST-ZP		Dalese						Change	Addition
indicated	certify that the information supplied with to on this report is true and accurate and ability company or the receiver or trustee to the company or the receiver or trustee to the company of the receiver or trustee to the company with the company	Birst my signature shall have empowered to associate this	the same report as	s legal effect as if a required by Che	if made under oath; t apter 608, Florida St	met i em a manadi	ing memb	y that the infa er or manage	mation r of the