2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M05000003520

1. Entity Name CABOT CYPRESS CREEK TOWER 14 LLC



FILED Apr 27, 2007 08:00 AM Secretary of State

Principal Place of Business

100 SUMMER STREET, 23RD FLOOR BOSTON, MA 02111 Mailing Address

100 SUMMER STREET, 23RD FLOOR BOSTON, MA 02111



01252007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331

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8.	The above named entity submits	this statement for the	purpose of changi	ng its registered office	e or registered agent,	, or both, in the State of	f Florida. I	am familiar with, ar	id accept
	the obligations of registered ager	nt.	_						

SIGNATURE.

CITY-ST-ZIP

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when remstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOVANCSEK, LOUIS A 7755 OLD MILL ROAD GATES MILL, OH					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

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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: Calp Califor La

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- 617-423-67+1