

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT.

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90256 017 ****50.00

60037860



04052007 Chg-LLC CR2E083 (12/06)

4. FEI Number **43-2086018** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

DOCUMENT # M05000004507

1. Entity Name
PPF INDUSTRIAL 6400-6500 PARK OF COMMERCE
BOULEVARD, LLC



Principal Place of Business
3424 PEACHTREE ROAD NE, SUITE 800
ATLANTA, GA 30326

Mailing Address
3424 PEACHTREE ROAD NE, SUITE 800
ATLANTA, GA 30326

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 (NOTE: Registered Agent signature required when reinstating) DATE _____

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PPF INDUSTRIAL, LLC 3424 PEACHTREE ROAD, NE, SUITE 800 ATLANTA, GA 30326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Gail Freeman Gail Freeman 4/9/07 404-846-1363
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

PLEASE SEE ATTACHED SIGNATURE BLOCK.

ATTACHMENT

60037860

#m05000004507

ATTACHED TO 2007 FL ANNUAL REPORT FOR
PPF INDUSTRIAL 6400-6500 PARK OF COMMERCE BOULEVARD, LLC

SIGNATURE BLOCK:

PPF Industrial 6400-6500 Park of Commerce Boulevard, LLC

By: PPF Industrial, LLC, its Sole Member

By: PPF OP, LP, its Sole Member

By: PPF OPGP, LLC, its General Partner

By: Prime Property Fund, LLC, its Sole Member

By: Morgan Stanley Real Estate Advisor, Inc., its Manager

By: Gail Freeman
Gail Freeman, Assistant Secretary