

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006153

Entity Name: CHI/PACE CORNERS, LLC

FILED
Mar 14, 2011
Secretary of State

Current Principal Place of Business:

300 N. MAIN STREET, SUITE 402
GREENVILLE, SC 29601

New Principal Place of Business:

40 W. BROAD STREET
SUITE 410
GREENVILLE, SC 29601

Current Mailing Address:

POST OFFICE BOX 25909
GREENVILLE, SC 29616

New Mailing Address:

FEI Number: 20-3568574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: MGRM
Name: MCNICHOLAS, MICHAEL D
Address: P.O. BOX 25909
City-St-Zip: GREENVILLE, SC 29616

Title: MGRM
Name: MISIAVEG, WILLIAM A
Address: P.O. BOX 25909
City-St-Zip: GREENVILLE, SC 29616

Title: MGRM
Name: INGRAM, ROBERT B
Address: P.O. BOX 25909
City-St-Zip: GREENVILLE, SC 29616

Title: MGRM
Name: BENEDICT, ROBERT C
Address: P.O. BOX 25909
City-St-Zip: GREENVILLE, SC 29616

Title: MGRM
Name: GOODSON, WILLIAM B
Address: P.O. BOX 25909
City-St-Zip: GREENVILLE, SC 29616

I hereby 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: MICHAEL D. MCNICHOLAS

MGRM

03/14/2011

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