

# 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M06000000577

**FILED**  
**Dec 04, 2008**  
**Secretary of State**

**Entity Name:** MCZ/CENTRUM FLAMINGO I, L.L.C.

**Current Principal Place of Business:**

1555 NORTH SHEFFIELD  
CHICAGO, IL 60622

**New Principal Place of Business:**

ONE MERIDIAN CROSSINGS  
SUITE 100  
MINNEAPOLIS, MN 55423

**Current Mailing Address:**

1555 NORTH SHEFFIELD  
CHICAGO, IL 60622

**New Mailing Address:**

ONE MERIDIAN CROSSINGS  
SUITE 100  
MINNEAPOLIS, MN 55423

**FEI Number:** 20-4224130

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: LERNER, MICHAEL  
Address: 1555 NORTH SHEFFIELD  
City-St-Zip: CHICAGO, IL 60622

Title: MGR ( ) Delete  
Name: NIVEN, BRIAN  
Address: 1555 NORTH SHEFFIELD  
City-St-Zip: CHICAGO, IL 60622

Title: MGR ( ) Delete  
Name: MCLINDEN, JOHN  
Address: 225 WEST HUBBARD STREET, FOURTH FLOOR  
City-St-Zip: CHICAGO, IL 60610

Title: MGR (X) Delete  
Name: SLAVEN, ARTHUR  
Address: 225 WEST HUBBARD STREET, FOURTH FLOOR  
City-St-Zip: CHICAGO, IL 60610

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BUDD, JOSEPH R  
Address: ONE MERIDIAN CROSSINGS, SUITE 100  
City-St-Zip: MINNEAPOLIS, MN 55423

Title: MGR (X) Change ( ) Addition  
Name: MITCHELL, LEONARD A  
Address: ONE MERIDIAN CROSSINGS, SUITE 100  
City-St-Zip: MINNEAPOLIS, MN 55423

Title: MGR (X) Change ( ) Addition  
Name: KAUL, JOEL D  
Address: ONE MERIDIAN CROSSINGS, SUITE 100  
City-St-Zip: MINNEAPOLIS, MN 55423

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

I hereby certify that the information supplied with this filing does not qualify 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:** JOSEPH R. BUDD

MGR

12/04/2008

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