

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004144

FILED
Jul 11, 2007
Secretary of State

Entity Name: SP FORT LAUDERDALE LENDER, LLC

Current Principal Place of Business:

865 SOUTH FIGUEROA ST. STE 3500
LOS ANGELES, CA 90017

New Principal Place of Business:

515 S FLOWER STREET, 31ST FLOOR
LOS ANGELES, CA 90071

Current Mailing Address:

865 SOUTH FIGUEROA ST. STE 3500
LOS ANGELES, CA 90017

New Mailing Address:

515 S FLOWER STREET, 31ST FLOOR
LOS ANGELES, CA 90071

FEI Number: 20-3829983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

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: CB RICHARD ELLIS PAR, TNER III, L.L . C.
Address: 865 SOUTH FIGUEROA ST. STE 3500
City-St-Zip: LOS ANGELES, CA 90017

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CB RICHARD ELLIS PAR, TNER III, L.L . C.
Address: 515 S. FLOWER STREET, 31ST FLOOR
City-St-Zip: LOS ANGELES, CA 90071

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: JOHN M. GILB

SECY

07/11/2007

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