

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90082 011 ****50.00

DOCUMENT # M06000006319

1. Entity Name
GLENBOROUGH OAKVIEW CENTER, LLC



60034640

Principal Place of Business
400 SOUTH EL CAMINO REAL, 11TH FLOOR
SAN MATEO, CA 94402-1708

Mailing Address
400 SOUTH EL CAMINO REAL, 11TH FLOOR
SAN MATEO, CA 94402-1708

2. Principal Place of Business - No P.O. Box #
400 S. El Camino Real

3. Mailing Address
400 S. El Camino Real

Suite, Apt. #, etc.
Suite 1100

Suite, Apt. #, etc.
Suite 1100

City & State
San Mateo, CA

City & State
San Mateo, CA

Zip Country
94402-1708 U.S.

Zip Country
94402-1708 U.S.

03272007 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-5902361

Applied For
Not Applicable

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

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 _____ (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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGRM
GLENBOROUGH PROPERTIES, L.P.
400 SOUTH EL CAMINO REAL, 11TH FLOOR
SAN MATEO, CA 944021708

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Glenborough Fund XII, LLC
400 S. El Camino Real, Suite 1100
San Mateo, CA 94402-1708

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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.

S.V.P. of its managing member Glenborough Fund XII, LLC

SIGNATURE: G. Lee Burns 03/29/07 650.343.9300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #