2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006850

Entity Name: CLPF - MMIC VERO MOB GP, LLC

Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7785 BAYMEADOWS WAY, SUITE 200 5215 N. O'CONNOR BLVD, STE 1785 JACKSONVILLE, FL 32256

IRVING, TX 75039

Current Mailing Address: New Mailing Address:

7785 BAYMEADOWS WAY, SUITE 200 5215 N. O'CONNOR BLVD, STE 1785

IRVING, TX 75039 JACKSONVILLE, FL 32256

FEI Number: 20-5967759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROGERS, WILLIAM S JR. 1538 THE GREENS WAY, STE 105 ROGERS, WILLIAM S JR 7785 BAYMEADOWS WAY, STE 200

JACKSONVILLE, FL 32256 JACKSONVILLE BEACH, FL 32250 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: 04/21/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: (X) Change () Addition CLPF/MMIC VENTURE, L.P. CLPF/MMIC VENTURE, L.P. Name: Name:

Address: 7785 BAYMEADOWS WAY, SUITE 200 Address: 5215 N. O'CONNOR BLVD, STE 1785

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: IRVING, TX 75039

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: CLPF/MMIC VENTURE LP **MGRM** 04/21/2009