

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000005665

FILED  
Jul 10, 2009  
Secretary of State

**Entity Name:** ACP/URS INTERLACHAN CORPORATE CENTER LLC

**Current Principal Place of Business:**

C/O AMERICA'S CAPITAL PARTNERS  
444 BRICKELL AVE., SUITE 900  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

C/O AMERICA'S CAPITAL PARTNERS  
444 BRICKELL AVE., SUITE 900  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 26-0839647      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: ACP/URS MAITLAND LLC  
Address: 444 BRICKELL AVE., SUITE 900  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

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: ALLEN C. DE OLAZARRA

MGRM

07/10/2009

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