

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000000946

FILED
Feb 14, 2011
Secretary of State

Entity Name: CNL MACQUARIE GLOBAL GROWTH ADVISORS, LLC

Current Principal Place of Business:

450 SO. ORANGE AVE.
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

PO BOX 4920
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 26-3861427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARCELLI, LINDA A
450 SO. ORANGE AVE.
ORLANDO, FL 32801 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
Name: SENEFF, JAMES M JR.
Address: 450 SO. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: MGR
Name: BOURNE, ROBERT A
Address: 450 SO. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: MGR
Name: HYLTI, ANDREW A
Address: 450 SO. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

Title: MGR
Name: BANKS, MATTHEW S
Address: ONE NORTH WACKER DR.
City-St-Zip: CHICAGO, IL 60606

Title: MGR
Name: MULLEN, MARK D
Address: ONE NORTH WACKER DR.
City-St-Zip: CHICAGO, IL 60606

Title: MGR
Name: MENTZINES, STEPHEN S
Address: ONE NORTH WACKER DR.
City-St-Zip: CHICAGO, IL 60606

I hereby 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: ROBERT A. BOURNE

MGR

02/14/2011

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