


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

<b>LIMITED LIABILITY COMPANY ANNUAL REPORT 1998</b>		 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</b>		<b>FILED</b> <b>98 MAR 25 PM 1:43</b> <b>SECRETARY OF STATE TALLAHASSEE, FLORIDA</b>	
<b>FILING FEE \$ 188.75    Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>					
<b>1. Name and Mailing Address of Limited Liability Company</b>  <b>COLONY CSC GENPAR, LLC 1999 AVENUE OF THE STARS, SUITE 1200 LOS ANGELES CA 90067</b>  <i>CS-AR</i>			<b>DOCUMENT # M97000000736</b>  <b>1a. Principal Place of Business Address</b>  <b>1999 AVENUE OF THE STARS, SU LOS ANGELES CA 90067</b>		
<b>2. Principal Place of Business</b>  Suite, Apt. #, etc.  City & State  Zip      Country		<b>2a. Mailing Address</b>  Suite, Apt. #, etc.  City & State  Zip      Country		<b>3. Date Organized or Qualified</b> <b>04/28/1997</b> <b>3a. State of Formation</b> <b>DE</b> <b>4. FEI Number</b> <b>95-4632940</b> <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> <del>APPLIED FOR</del> <b>5. Date of Last Report</b> <b>6. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required	
<b>7. Name and Address of Current Registered Agent</b>  <b>CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301</b>			<b>8. Name and Address of New Registered Agent/Office</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City      Zip Code <div style="text-align: right;"><b>FL</b></div>		
<b>9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.</b>					
<b>SIGNATURE _____ DATE _____</b> <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
<b>10. Title</b>	<b>Managing Members/Managers</b>	<b>Business Street Address</b>		<b>City, State and Zip Code</b>	
<b>MGRM</b>	<b>COLONY DEVELOPMENT HOL</b>	<b>1999 AVENUE OF THE STARS,</b>		<b>LOS ANGELES CA</b>	
<b>600002475746--4</b> <b>-04/01/98--01086--011</b> <b>****188.75 ****188.75</b>					

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address. **COLONY DEVELOPMENT HOLDINGS, L.P., sole member**

**SIGNATURE:** By: *Mark M. Hedstrom* **Mark M. Hedstrom, V.P.** **310-282-8820**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #