

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 31 PM 3:46

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M98000000307 CP GENERAL PARTNER, LLC 580 WEST GERMANTOWN PIKE, SUITE 200 PLYMOUTH MEETING PA 19462		1a. Principal Place of Business Address 580 WEST GERMANTOWN PIKE, SU PLYMOUTH MEETING PA 19462	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified 03/30/1998		3a. State of Formation DE	
4. FEI Number ☒ Applied For ☐ Not Applicable		5. Date of Last Report NONE	
6. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		8. Name and Address of New Registered Agent/Office Name Elaine Hault Street Address (P.O. Box Number is Not Acceptable) 100 Century Blvd Suite, Apt. #, etc. City West Palm Beach FL Zip Code 33417	
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. SIGNATURE Elaine Hault DATE 3-24-99 (Registered Agent Accepting Appointment) (NOT Registered Agent signature required when renouncing)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	MONTGOMERY CV REALTY,	580 WEST GERMANTWON PIKE,	PLYMOUTH MEETING PA
			500002834365--C -04/09/99--01038--002 ****188.75 ****188.75
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. SIGNATURE: James P. ... Managing Trustee 3/24/99 SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			