## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # M98000000916** 

1. Entity Name

MAITLAND COLONNADES - FBEC, L.L.C.

FILED
Mar 05, 2007, 08:00 Al
Secretary of State

Principal Place of Business

C/O HAGAN & ASSOC. ATTN: E MACHAJ

200 E. RANDOLPH CHICAGO, IL 60601

SIGNATURE:

SIGNATURE AND TYPES OR PRINTE

Mailing Address

C/O HAGAN & ASSOC, ATTN: E MACHAI 200 E. RANDOLPH CHICAGO, IL 60601



## DO NOT WRITE IN THIS SPACE

02012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 52-2115599

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

## DO NOT WRITE IN THIS SPACE

Ty Spearing, Vice President & Assistant Secretary,

Daytime Phone #

Florida Office Property Company, Inc.

1/30/07 312.228:2895

	and the second s		
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Schalure, typed or printed name of registered agent and tide if applicable. (NOTE Registered Agent signature required when reinstating)  DATE			
Filing Fee is \$50.00 Due by May 1, 2007		03/13/07-80085-007 50.00	
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	FLORIDA OFFICE PROPERTY COMPANY, INC.	ı	
STREET ADDRESS	200 EAST RANDOLPH DRIVE, SUITE 4300	1	· '
CITY-ST-ZIP	CHICAGO, IL 60601		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this 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 rederver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

RESENTATIVE

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REA