

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR 23 AM 8:22

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| LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 |  | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS |
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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # M98000001397**

EIG HOLLY HILL, LLC
%EIG OPERATING PARTNERSHIP, LP
111 E. WAYNE ST., SUITE 500
FORT WAYNE IN 46802

1a. Principal Place of Business Address

%EIG OPERATING PARTNERSHIP,
111 E. WAYNE ST., SUITE 500
FORT WAYNE IN 46802

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

09/02/1998

DE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

35-2055403
~~APPLIED FOR~~

☐ Applied For

☐ Not Applicable

City & State

City & State

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☒

Zip

Country

Zip

Country

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

200002858792---

04/30/99-01104-012

****197.50 ****197.50

FL

Zip Code

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

DATE

| 10. Title | Managing Members/Managers | Business Street Address | City, State and Zip Code |
|-------------|---------------------------|-----------------------------|--------------------------|
| MEM MGRM | EIG OPERATING PARTNE, | 111 E. WAYNE ST., SUITE 500 | FORT WAYNE IN |
| . | | | |
| . | | | |
| . | | | |

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. EIG Operating Partnership, L.P., its sole member, by EIG Realty, Inc., its sole general partner, by:

SIGNATURE:

Todd M. Jacobs
SIGNATURE AND TITLE OF PERSON (NAME OF SIGNING MANAGER) WHO FOR MAJORITY

4/19/99 219-426-4704
Date (Signature)