

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001526

Entity Name: SUNTRUST CENTER, L.L.C.

FILED  
Mar 20, 2009  
Secretary of State

**Current Principal Place of Business:**

ONE NORTH WACKER DRIVE  
9TH FLOOR  
CHICAGO, IL 60606 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE NORTH WACKER DRIVE  
9TH FLOOR  
CHICAGO, IL 60606 US

**New Mailing Address:**

FEI Number: 36-4104257      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEMS  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGRM ( ) Delete  
Name: MACQUARIE OFFICE (US, ) NO. 2 CORPOR A TION  
Address: ONE NORTH WACKER DRIVE, 9TH FLOOR  
City-St-Zip: CHICAGO, IL 60606

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MACQUARIE OFFICE (US, ) NO 2 CORPOR A TION  
Address: ONE NORTH WACKER DRIVE, 9TH FLOOR  
City-St-Zip: CHICAGO, IL 60606

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: PAUL SORENSEN

PRES

03/20/2009

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