2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M99000000218

1. Entity Name
HIGHWOODS DLF, LLC

Principal Place of Business

C/O HIGHWOODS PROPERTIES, INC. 3100 SMOKETREE CT., SUITE 600 RALEIGH, NC 27604 Mailing Address

C/O HIGHWOODS PROPERTIES, INC. 3100 SMOKETREE CT., SUITE 600 RALEIGH, NC 27604

FILED Apr 03, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number 56-2124221 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the purpose of changing as registered agent.	ng its registered	d office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or punted name of registered agent and title if applicable,	(NOTE, Registered	Agent signature required when reinstating)	GATE
F	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HIGHWOODS REALTY LIMITED PARTNERSHIP 3100 SMCKETREE CT., SUITE 600 RALEIGH, NC 27604	,		000000490446 04/18/06-80056-012 50.00
Title Name Strict address City-St-Zip				
Thile Name Street address City-SI-Zip			DO	NOT WRITE
title Hame Street adoress City-St-Zip			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAMC STREET ADDRESS				

11. I hereby certify that the information supplied with this filling 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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