2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED Jan 06, 2004 Secretary of State

Entity Name: TMW U.S. PROPERTY FUND MANAGEMENT GMBH, LLC

Current Principal Place of Business: New Principal Place of Business: TWO RAVINIA DRIVE SUITE 400 ALTANTA, GA 303462104 **New Mailing Address: Current Mailing Address:** TWO RAVINIA DRIVE SUITE 400 ALTANTA, GA 303462104 FEI Number: 52-2133551 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete VON WERZ, GEORGE Name: Name: WITTLESBACHER PLATZ 1 D-80333 MUNICH Address: Address: City-St-Zip: GERMANY. City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HOELLER, THOMAS Name: Name: Address: WITTLESBACHER PLATZ 1 D-80333 MUNICH Address: City-St-Zip: GERMANY, City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KRENZLER, VOLKER Name: Name: Address: WITTLESBACHER PLATZ 1 D-80333 MUNICH Address: City-St-Zip: GERMANY. City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PAHL, DAVID C Name: Address: TWO RAVINIA DRIVE Address: City-St-Zip: ALTANTA, GA 303462104 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCWHIRTER, THOMAS F JR Name: Name: TWO RAVINIA DRIVE Address: Address: City-St-Zip: ALTANTA, GA 303462104 City-St-Zip: Title: () Delete Title: () Change () Addition CAMPBELL, KENNETH A Name: Name: Address: TWO RAVINIA DRIVE Address: ALTANTA, GA 303462104 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENNETH A. CAMPBELL MGRM 01/06/2004