FILED 2006 LIMITED LIABILITY COMPANY - ANNUAL REPORT Mar 20, 2006 08:00 AM **Secretary of State** DOCUMENT # M00000000872

1. Entity Name
COLONNADE PROPERTIES LLC

Principal Place of Business ONE ROCKEFELLER PLAZA, SUITE 2300 NEW YORK, NY 10020

Mailing Address

ONE ROCKEFELLER PLAZA, SUITE 2300 NEW YORK, NY 10020

DO NOT WRITE IN THIS SPACE

CR2E083 (11/05) 02082006 No Chg-LLC

4. FEI Number 13-4083054 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC. ONE S.E. THIRD AVENUE MIAMI, FL 33131

THEE NAME STREET ADDRESS CITY-ST-ZIP

MAME STREET ADDRESS

NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP

City-ST-ZIP

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| | named entity submits this statement for the purpose of cha tions of registered agent. | Inging its registered office or registered agent, or bo | oth, in the State of Florida. I am lamiliar with, and accept |
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| and deligat | di i oglotojos agont. | | |
| SIGNATURE Suculture, typed or printed name of registered agent and fifte if applicable. | | (NOTE Registered Agent signature required when reinstating) | DATE |
| Fi | iling Fee is \$50.00 ue by May 1, 2006 | · | 190000475 75 5 04/05/06-80029-011-50.00 |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TIPLE | MGR | | |
| NAME | SAMBUCO, JOSEPH S | i i | |
| STREET ADDRESS | ONE ROCKEFELLER PLAZA, SUITE 2300 | \$ | |
| City-St-Zip | NEW YORK, NY 10020 | l l | |
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|--|----------|----------|---|--|--|--|
| NAME | | | | | | |
| STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | | |
| 11. I hereby certify that the information supplied with this liting 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 it made under oath; that I am a managing member or manager of the limited liability company or the reserver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. | | | | | | |
| | | | , | | | |

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE