

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 10, 2006 8:00 am
Secretary of State

05-10-2006 90017 044 ****50.00

DOCUMENT # M01000000346

1. Entity Name
THE APARTMENT GROUP, LLC



Principal Place of Business
**1201 WEST PEACHTREE STREET, STE. 3300
ATLANTA, GA 30309**

Mailing Address
**1201 WEST PEACHTREE STREET, STE. 3300
ATLANTA, GA 30309**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1350 Ave of the Americas

New York, NY

10019

USA

04102006 Chg-LLC CR2E083 (11/05)

4. FEI Number
58-2600464

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
CUSHMAN & WAKEFIELD OF GEORGIA, INC.
1201 WEST PEACHTREE STREET, STE. 3300
ATLANTA, GA 30309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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CITY - ST - ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing 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 prepare this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Michael G. Flood Controller of C&W of GA, Inc. 4/26/06

212 - 841-7726

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

Date

Daytime Phone #

ATTACHMENT
20045531
#M01000000346



**CUSHMAN &
WAKEFIELD®**

Cushman & Wakefield, Inc.
1350 Avenue of the Americas
New York, NY 10019-4707
(212) 841 7500 Tel
www.cushwake.com

Certified Mail
7005 1820 0002 0445 2442

April 28, 2006

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

Payment

Enclosed is our return and/or payment as noted below.

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

THE APARTMENT GROUP, LLC.

\$ 50.00

Effective December 19, 2005, the taxpayer changed its mailing address from 51 West 52nd street, New York, NY 10019 to 1350 Avenue of the Americas, New York, NY 10019.

Kindly update your records to reflect the aforementioned change.

Very truly yours,

CUSHMAN & WAKEFIELD, INC.

Mark A. Castor
Tax Manager

Period Covered
2006
JS