## 2006 LIMITED LIABILITY COMPANY ARNUAL REPORT

## DOCUMENT # M98000000537

1. Entity Name

CONCORD RETAIL ASSOCIATES, L.L.C.



U0000049506S

**FILED** 

Apr 06, 2006 08:00 AM Secretary of State

Principal Place of Business

**28 STATE STREET** C/O TA ASSOCIATES REALTY BOSTON, MA 02109

Mailing Address

28 STATE STREET C/O TA ASSOCIATES REALTY BOSTON, MA 02109

02022006 No Chg-LLC

CR2E083 (11/05)

06-1517733

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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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 the If applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

MANAGING MEMBERS/MANAGERS					
TITLE	MEM				
NAME	THE REALTY ASSOCIATES FUND IV, L.P.	The state of the s			
STREET ADDRESS	C/O/ TA ASSOCIATES REALTY, 28 STATE ST.				
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KAME	RUANE, MICHAEL A				
STREET ADDRESS	28 STATE STREET				
City-ST-ZIP	BOSTON, MA 02109				
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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 eath; 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: Michael Ruane, Manager

3/2/106

617: 475- 2700

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

Date

Davilime Phone 8