


FILED
May 11, 2005 8:00 am
Secretary of State

05-11-2005 90031 043 ****50.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

20058513



DOCUMENT # L99000009346 1. Entity Name RPK HOUSING, L.L.C.			
Principal Place of Business 599 WEST PUTNAM AVENUE, SUITE 3 GREENWICH, CT 06830		Mailing Address 599 WEST PUTNAM AVENUE, SUITE 3 GREENWICH, CT 06830	
2. Principal Place of Business <i>The Brandywine Center, 580 Village Blvd</i> Suite, Apt. #, etc. <i>Suite 120</i> City & State <i>West Palm Beach, Florida</i> Zip <i>33409</i> Country <i>U.S.A.</i>		3. Mailing Address <i>The Brandywine Center, 580 Village Blvd</i> Suite, Apt. #, etc. <i>Suite 120</i> City & State <i>West Palm Beach, Florida</i> Zip <i>33409</i> Country <i>U.S.A.</i>	
4. FEI Number 06-1566580		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent THE RICHMAN GROUP OF FLORIDA, INC THE BRANDYWINE CENTRE I 580 VILLAGE BLVD., SUITE 120 WEST PALM BEACH, FL 33409		7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TRG GP LLC BRANDYWINE CTR I, 580 VILLAGE BLVD. #120 WEST PALM BEACH, FL 33409 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.			
By: <i>TRG GP LLC</i> its sole member SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE <i>Kristina M. Miller, President</i> Date <i>203-869-0900</i> Daytime Phone #			