2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M00000001428

1. Entity Name

4150 FORD STREET, FT. MEYERS, FLORIDA MM, LLC



Principal Place of Business

C/O URBANAMERICA L.P. 30 Broad Street, 31St floor New York, NY 10004 Mailing Address

C/O URBANAMERICA L.P. 30 Broad Street, 31St floor New York, NY 10004

05162006 No Chg-LLC

CR2E083 (11/05)

FILED

May 31, 2006 08:00 AM Secretary of State

4. FEI Number 13-4126889 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

SIGNATURE AND TYPED OR PRI

DC	NOT	WRITE
IN	THIS	SPACE

 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 little if applicable.	(NOTE: Registered Agent signature required when reinstaling) DATE	
Filing Fee is \$50.00 Due by September 6, 2006			
9. ITTLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM URBANAMERICA LP 30 BROAD STREET, 31ST FLOOR NEW YORK, NY 10004	U00000566435 05/31/06-80003-009 55.00	
TITLE NAME STREET ADDRESS CITY-S1-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY - ST-ZIP	/		

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 stall 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 of trustee empoyered to execute this report as required by Chapter 608, Florida Statutes.

O REPRESENTATIVE

Date

Daytime Phone #