## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

### DOCUMENT # L00000014027

1. Entity Name



**FILED** May 08, 2006 8:00 am Secretary of State

05-08-2006 90035 007 \*\*\*\*50.00

PPLOOUUP

ST. PETERSBURG, FL REALTY LLC

485 MADISON AVE., 24TH FLOOR

NEW YORK CITY, NY 10022



485 MADISON AVE., 24TH FLOOR

NEW YORK CITY, NY 10022

## DO NOT WRITE IN THIS SPACE



02162006 No Chg-LLC

CR2E083 (11/05)

4. FEL Number 13-4144784

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and	Address of	Current R	leaistered	Agent
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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

# DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or both, in the Sta	ate of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TLM REALTY CORP. 485 MADISON AVE. NEW YORK, NY 10022		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OEHL, RONALD J 485 MADISON AVE NEW YORK, NY 10022		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
THTLE NAME STREET ADDRESS CITY-ST-7IP			

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 execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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