


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000015424 1. Entity Name 1887 HYDE PARK STREET, L.L.C.	
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Principal Place of Business 1924 S. OSPREY AVE., STE. 201 SARASOTA, FL 34239	Mailing Address P.O. BOX 1329 SARASOTA, FL 34230
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04112007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0335150	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent MCGINNESS, W. LEE 1800 SECOND STREET SUITE 971 SARASOTA, FL 34236

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000738818
05/11/07-80083-004 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENSTREET INC. 1924 S. OSPREY AVE., STE. 201 SARASOTA, FL 34239
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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 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: Randy SZ 4/23/07 (941) 316-6814
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #