## 2006 LIMITED LIABILITY COMPANY

## Feb 24, 2006 8:00 am ANNUAL REPORT Secretary of State DOCUMENT # L01000016733 02-24-2006 90245 039 \*\*\*\*50.00 MARINER DRIVE ASSOCIATES LLC Principal Place of Business Mailing Address % MARVIN S. ROSEN % MARVIN S. ROSEN 20010312 222 LAKEVIEW AVE., SUITE 800 222 LAKEVIEW AVE., SUITE 800 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 2. Principal Place of Business SOO S. MILWAUKEE 3. Mailing Address 800 S. MILWALIKEE AVE Suite, Apt. #, etc. Suite, Apt. #, etc. 01242006 Chg-LLC CR2E083 (11/05) STE 170 STE 17b 4. FEI Number 75-2975276 City & State City & State Applied For 1 BÉRTYVILLE NOT APPLICABLE LBERTY VILLE Not Applicable Country Country \$5.00 Additional <u>60048</u> 5. Certificate of Status Desired 60048 Westons LAND 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSEN, MARVIN S Street Address (P.O. Box Number is Not Acceptable) 222 LAKEVIEW AVE., SUITE 800 WEST PALM BEACH, FL 33401 NAPUS 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) Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. TITLE MGR Delete TITLE ☐ Change ☐ Addition DRE, INC NAME NAME STREET ADDRESS 800 S MILWAUKEE STE 160 STREET ADDRESS CITY-ST-ZIP LIBERTYVILLE, IL 60048 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Changè TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

847-816**-**6400

## ATTACHMENI-20010313

## MARINER DRIVE ASSOCIATES LLC

800 South Milwaukee Avenue, Suite 170 Libertyville, Illinois 60048-3255 Tel: 847-816-6400 \* Fax: 847-816-6783

February 20, 2006

**Divisions of Corporations** PO Box 6478 Tallahassee, FL 32314

Re: Document #L01000016733

Mariner Drive Associates, LLC

Ladies/Gentlemen:

Enclosed for filing is the 2006 Limited Liability Company Annual Report and our check in the amount of \$50.00 for the filing fee.

Sincerely,

MARINER DRIVE ASSOCIATES, LLC By: DRE, Inc., its managing member

President

dc

**Enclosures**