FILED Apr 10, 2007 0 Secretary of

2007 LIMITED LIABILITY-COMPANY

	ANNUAL	REPORT			
DOCUN 1. Entity Name RASTATT					\
Principal Place of Business 46 STATE STREET, 3RD FLOOR ALBANY, NY 12207 Mailing Address 46 STATE STREET, 3RD FLOO ALBANY, NY 12207			 		
		,			<u> </u>
DO NOT WRITE IN THIS SPA			CE	03122007 No Chg-LLC	CR2E083 (11/05)
				4. FEI Number NOT APPLICABLE	Applied For Not Applicable
	•			5. Certificate of Status Desired	\$5.00 Additional Fee Required
	6. Name and Address of Current R	egistered Agent		F . 194	
UCC FILING & SEARCH SERVICES, INC. 1574 VILLAGE SQUARE BLVD SUITE 100 TALLAHASSEE, FL 32309			\$ · · · · · · · · · · · · · · · · · · ·	DO NOT WI	
SIGNATURE	ons of registered agent. Signature, typed or printed name of registered agent an ling Fee is \$50.00 ue by May 1, 2007	d title if applicable (NOTE: Registers	d Agent signature required	s wasn renstating)	DATE
9.	MANAGING MEMBER	RS/MANAGERS		HOODE	00698519
TITLE NAME STREET ADDRESS CITY-S1-ZIP	MGR CAVERSHAM LLC 46 STATE STREET, 3RD FLOOR ALBANY, NY 12207		fs.		7-80005-025 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SILVERSANDS LLC 30 E. 40TH ST. NEW YORK, NY 10016				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARRISON LIMITED PO BOX 227 CLINCH'S HOUSE LORD STREET DOUGLAS 10M,		e e e e e e e e e e e e e e e e e e e	DO NOT W	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			* \$. # . * . *	and the state of t	Example Property of the State o
TITLE NAME STREET ADDRESS					

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 be the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or trustee empayment to exempt the this report as required by Chapter 608, Florida Statutes.

URE: FOR AND CALDENIAL OF CAVERSHAM LLC:
SIGNATURE AND TYPED OF PRINCED HAME OF SIGNING MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE SIGNATURE:

CITY-ST-ZIP

0 2 APR 2007

Date

Daytime Phone #