


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90143 037 \*\*\*\*50.00

<b>DOCUMENT # L02000012601</b>	
1. Entity Name <b>STINKY KNOLL, LLC</b>	

Principal Place of Business <b>329 PERKINS STREET BOSTON, MA 02130 US</b>	Mailing Address <b>329 PERKINS STREET BOSTON, MA 02130 US</b>
--	--

**20008364**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01272006 Chg-LLC CR2E083 (11/05)

4. FEI Number <b>01-0715442</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$5.00</b> Additional Fee Required
6. Name and Address of Current Registered Agent <b>LEVINE, LAWRENCE A.P.A. 790 EAST BROWARD BOULEVARD SUITE 302 FORT LAUDERDALE, FL 33301</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code

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.

<b>Filing Fee is \$50.00 Due by May 1, 2006</b>	<b>Make check payable to Florida Department of State</b>
---	--

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MUNDEL, ELISABETH R 329 PERKINS STREET BOSTON, MA 02130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RICHARDS, DAVID M 5277 SPAULDING BRIDGE ROAD BELGRADE, MT 79714 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>205 Pleasant Street Paxton, MA 01612</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:**  **Elisabeth R. Mundel** 2/4/06 617-522-6425  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT 20008364

#202000012601

MOUNTAIN, DEARBORN & WHITING LLP

COUNSELORS AT LAW

370 MAIN STREET  
WORCESTER, MASSACHUSETTS 01608-1778

THOMAS R. MOUNTAIN  
RICHARD W. DEARBORN  
SAMUEL R. DESIMONE  
HENRY W. BETH  
STUART A. HAMMER  
JAMES D. O'BRIEN, JR.  
FRANCIS J. RUSSELL  
DALE R. HARGER  
MARK W. BLOOM  
DONALD J. O'NEIL  
ANN K. MOLLOY  
PATRICIA FINNEGAN GATES  
SHERRI SACKS-MARTIN\*  
PAUL C. FOLEY

\*ADMITTED ONLY IN CONN.

TELEPHONE  
508-756-2423  
FACSIMILE  
508-755-6640

JOSEPH LIAN, JR.  
OF COUNSEL

ALFRED N. WHITING  
1953-1989

February 13, 2006

Division of Corporations  
P.O. Box 6478  
Tallahassee, FL 32314

Re: *Stinky Knoll, LLC*

Dear Sir or Madam:

Enclosed is the 2006 *Limited Liability Company Annual Report* for Stinky Knoll, LLC. Also enclosed is a check in the amount of \$50 representing the filing fee.

Very truly yours,

  
Ann K. Molloy

kjb

Enclosures