


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 14, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L02000035091</b> 1. Entity Name <b>THE CONCESSION LAND DEVELOPMENT, LLC</b>	
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Principal Place of Business <b>9916 E HARRY, SUITE A04 WICHITA, KS 67207</b>	Mailing Address <b>9916 E. HENRY SUITE 104 WICHITA, KS 67207</b>
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03232006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>45-0498123</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

**DAVES, KEVIN  
409 N. WASHINGTON DRIVE  
SARASOTA, FL 34236**

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$50.00  
Due by May 1, 2006**

**1100000509265  
04/28/06-80054-010 50.00**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRD CONCESSION ASSOCIATES LLC 9916 E. HARRY, SUITE 104 WICHITA, KS 67207</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR PMC CONCESSION LLC SE 17TH ST, 2ND FLOOR NEW YORK, NY 10003</b>
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**DO NOT WRITE  
IN THIS SPACE**

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:**

*Kevin Daves*

**4/11/04**

**314  
686-2290**

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

Date

Daytime Phone #