## 2007 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

## ANNUAL REPORT

1. Entity Name LK CONDO, LLC

Principal Place of Business

111-8TH AVENUE

**SUITE 1500** NEW YORK, NY 10011



Mailing Address

111-8TH AVENUE SUITE 1500 (M.RABINOWITZ) NEW YORK, NY 10011

**FILED** Apr 25, 2007 08:00 A Secretary of State



04162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
14-1879720		Not Applicable
5. Certificate of Status Desired	<b>\$5.00</b> Fee Requ	

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF ORLANDO 300 S. ORANGE AVE. SUITE 1000 (JGW) ORLANDO, FL 32801

DOCUMENT # L03000004694

IN THIS SPACE.

8. The above named entity submits this statement for the purpose of changing	ng its registered office or registered agent, or both, in the State of Flo	orida. I am familiar with, and accept
the obligations of registered agent		•
" SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE

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

U00000729271 05/08/07-80032-018 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RABINOWITZ, MARTIN J 111 - 8TH AVENUE, SUITE 1500 NEW YORK, NY 10011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELANEY, TOM 111 - 8TH AVENUE, SUITE 1500 NEW YORK, NY 10011
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TITLE , NAME , STREET ADDRESS CITY-ST-ZIP	And Supplied to the supplied t

DO NOT WRITE

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 timited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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