## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000004113

1. Entity Name

FEDÉRAL HIGHWAY, LLC



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

06 MAY -1 AM 9: 47

Principal Place of Business

Mailing Address

2837 SHERIDAN PLACE EVANSTON, IL 60201

2837 SHERIDAN PLACE EVANSTON, IL 60201



04242006 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 Registered Agent

DAYAN, SALOMON J

## DO NOT WRITE

980 S. OCEAN BLVD. PALM BEACH, FL 33480		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: R		(NOTE: Registered	Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2006			500075288425 05/25/0601024026 **450.00
9. TITLE NAME STREET ADDRESS CITY-ST-2IP	MANAGING MEMBERS/MANAGERS  MGR  DAYAN, SALOMON J  2837 SHERIDAN PLACE  EVANSTON, IL 60201		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME - STREET ADDRESS 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 fiability company or the receiver/or justee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #