## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000004128

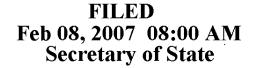
1. Entity Name GEORGIA PROPERTY, LLC

Principal Place of Business



Mailing Address

2837 SHERIDAN PLACE 2837 SHERIDAN PLACE EVANSTON, IL 60201 EVANSTON, IL 60201





## DO NOT WRITE IN THIS SPACE

01252007 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 980 S. OCEAN BLVD. PALM BEACH, FL 33480

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of cha tions of registered agent	anging its registere	d office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.				
Signature, typed or printed name of registered agent and title if applicable		(NOTE Registered Agent signature required when reinstating)		DATE
F D	iling Fee is \$50.90 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	DAYAN, SALOMON J			
STREET ADDRESS	2837 SHERIDAN PLACE			
CHY-ST-ZIP	EVANSTON, IL 60201			
INTLE				
NAME				U05555556
STREET ADDRESS				U00000628458 02/16/07-80016-003 500.00
CITY-ST-ZIP				05\10\0\-00010_002 200°00
TITLE				
NAME				
STREET ADDRESS			200	NOT MOITE
City-St-Zip			טע	NOT WRITE
THILE			181 -	THE COACE
NAME			IN	THIS SPACE
STREET ADDRESS				
CHY-SI-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
Trice				
NAME				
GIBLLI TUUBEGG				

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 frue 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:

CHY-SI-ZIP

THE ALL PART OF MALE HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/29/03

Daytime Phone #