

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009651

FILED
May 03, 2006
Secretary of State

Entity Name: GOTHAM ASSOCIATES, L.L.C.

Current Principal Place of Business:

P.O. BOX 2754
SARASOTA, FL 34230

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2754
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 20-0841627 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OLIVIER, JOHN D ESQ.
2033 MAIN STRET, SUITE 600
SARASOTA, FL 34237 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SCHILDKRAUT, ADAM M
Address: 3767 EAGLE HAMMOCK DRIVE
City-St-Zip: SARASOTA, FL 34240 US

Title: MGR () Delete
Name: GOLDFINE, PETER M
Address: 5012 EASTCHESTER DRIVE
City-St-Zip: SARASOTA, FL 34234 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ADAM SCHILDKRAUT

MGR

05/03/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date