2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000052413

1. Entity Name 377 PB, LLC



FILED Feb 03, 2006 08:00 AM Secretary of State

Principal Place of Business

800 S. MILWAUKEE AVE

STE. 170 LIBERTYVILLE, IL 60048-3255

Mailing Address

800 S. MILWAUKEE AVE

STE. 170 LIBERTYVILLE, IL 60048-3255



01182006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1332148 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime From #

6. Name and Address of Current Registered Agent

EGIDI, DENNIS R 248 SPRINGLINE ROAD NAPLES, FL 34102

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	named entity submits this statement for the constant of the co	the purpose of changing its register Euch	ed office or registered agent, or both, i	n the State of Florida. I am lamiliar with, and accept	
	Signature, typed or printed name of registered agent and	d tip a applicable. INCTE: Registers	ed Agent signature required when remaining)	DATE	
Pi Di	iling Fee is \$50.00 ue by May 1, 2006				
9.	MANAGING MEMBER	S/MANAGERS	T .		
TITLE NAME SIMEET ADDRESS CITY-ST-ZIP	MGR DRE, INC. 246 SPRINGLINE ROAD NAPLES, FL 34102			180 mma 1995a	
TITLE NAME STREET ADDRESS CHY-ST-ZIP					
title Havae Stree1 address City-St-Op			DO N	NOT WRITE	
TITLE NUME STREET ADDRESS CITY-SI-ZIP			IN TI	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS GITY-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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.					