2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000057486

1. Entity Name
MK PROPERTIES OF SARASOTA, L.L.C.

Principal Place of Business	Mailing Address
1925 OLD WILLOW ROAD NORTHFIELD, IL 60093	1925 OLD WILLOW ROAD NORTHFIELD, IL 60093

01192006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1449525
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KOHL-HELBIG, LAUREN ESQ.
1800 SECOND STREET
901
SARASOTA, FL 34236

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	KAISER, GEORGE
STREET ADDRESS	1925 OLD WILLOW ROAD
CITY-ST-ZIP	NORTHFIELD, IL 60093
TITLE	MGRM
NAME	MILES, JOSEPH E
STREET ADDRESS	1840 EAST RIDGEWOOD LANE
CITY-ST-ZIP	GLENVIEW, IL 60025
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
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TITLE	
NAME	
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CITY-ST-ZIP	

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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.

SIGNATURE: Joseph E Miles Joseph E. Miles 1/27/06 (847)486-0055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #