2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: _

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

FILED Apr 07, 2006 08:00 AM Secretary of State

(617)720-5800 Deyama Phone #

ANNUAL REPORT				Sacratam	of Stata
1. Entity Nar 231 HAR	RBOR DRIVE, L.C.	158		Secretary	or State
99 NESBIT	ce of Business STREET DA, FL 33950	Mailing Address ONE JOY STREET BOSTON, MA 02108		\$ 200 (1107)	S (S)() Svery Sivel revend nië very
DO NOT WRITE IN THIS SPACE			44	03312006 No Chg-LLC CR2	PE083 (11/05)
			CE	4. FEI Number 13-7013762 5. Certificate of Status Desired	Applied For Not Applicable \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent					
HACKETT, JACK O II 99 NESBIT STREET PUNTA GORDA, FL 33950			DO NOT WRITE IN THIS SPACE		
3. 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. It am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and tiffe if applicable (NOTE: Registered Agent signature required when reinstalling) DATE					
Filing Fee is \$50.00 Due by May 1, 2006			U00000497410 04/22/06-80055-010 50.00		
9.	MANAGING MEMBERS	/MANAGERS	1		
TITLE NAME STREET ADDRESS CITY-ST-ZIF	MGR PARAFESTAS, ANASTASIAS ONE JOY STREET BOSTON, MA 02108				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRIT	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPAC	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this tiling 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 acculate and that the signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited flability company or the receiver of trustee empowered to execute this report as required by Chapter 608. Florida Statutes.					