

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043594

Entity Name: KNOXVILLE FIVE LLC

FILED
Jun 20, 2006
Secretary of State

Current Principal Place of Business:

85 MADISON STREET
#3D
HOBOKEN, NJ 07030

New Principal Place of Business:

406 JEFFERSON STREET
#411
HOBOKEN, NJ 07030

Current Mailing Address:

85 MADISON STREET
#3D
HOBOKEN, NJ 07030

New Mailing Address:

P.O. BOX 143
HOBOKEN, NJ 07030

FEI Number: 03-0563056 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:

HEPNER, PAUL J
4329 PINE MEADOW TERRACE
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

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: MGRM () Delete
Name: HEPNER, CAROLINE R
Address: 85 MADISON STREET #3D
City-St-Zip: HOBOKEN, NJ 07030

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HEPNER, CAROLINE R
Address: 406 JEFFERSON STREET #411
City-St-Zip: HOBOKEN, NJ 07030

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: CAROLINE HEPNER

MGRM

06/20/2006

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