2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Aug 25, 2006 8:00 am Secretary of State

1. Entity Name QM&EA PROPERTIES, LLC					08-25-2006 90050 012 ****50.00	
Principal Place of Business 286 PRAIRIE VIEW LANE WHEELING, IL 60090		Mailing Address 286 PRAIRIE VIEW LANE WHEELING, IL 60090				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07312006 Chg-LLC CR2E083 (11/05)	
City & State		City & State			4. FEI Number Applied For Not Applicab	le
Zip	Country	Zîp	Country		5. Certificate of Status Desired \$5.00 Additional Fee Required	
	6. Name and Address of Current I	egistered Agent Name			7. Name and Address of New Registered Agent	_
					•	
15 GLEND	R, EDWARD PALE #A7 NTER, FL 33767	Street Address		Address ((P.O. Box Number is Not Acceptable)	
		City			Zip Code	_
The above named entity submits this statement for the purpose of changing its registere				or registe	rL `	ot
the obligat SIGNATURE .	ions of registered agent.					
	Signature, typed or printed name of registered agent a	ind title if applicable. (NOTE	: Registered Agent sign	sture required	d when reinstating) DATE	_
	ing Fee Is \$50.00 by September 6, 2006				Make check payable to Florida Department of State	. ,
9. MANAGING MEMBEF		RS/MANAGERS 10.			ADDITIONS/CHANGES	_
IIILE	MGRM	Detete	TITLE	i	☐ Change ☐ Addition	_
NAME	RHODES, QUANAH T	□ Odicte	NAME	ļ	_ County	
STREET ADDRESS	286 PRAIRIE VIEW LANE		STREET ADDRESS			
CITY-ST-ZIP	WHEELING, IL 60090		CITY-ST-ZIP			
TITLE NAME	MGRM WALSH, MARY	☐ Delete	TITLE NAME		☐ Change ☐ Additi	on
STREET ADDRESS	286 PRAIRIE VIEW LANE		STREET ADDRESS			
CITY+ST-ZIP	WHEELING, IL 60090		CITY-ST-ZIP	+		\dashv
TITLE	MGRM GUNTHER, ED	☐ Delete	TITLE NAME		Change Addition	on
NAME STREET ADDRESS	3 ASTOR COURT	· 🙀	STREET ADDRESS			- 1
CITY-ST-ZIP	LAKE FOREST, IL 60045		CITY-ST-ZIP			
TITLE	MGRM GUNTHER, APPLE	☐ Delete	TITLE NAME		Change Additi	on
STREET ADDRESS	3 ASTOR COURT		STREET ADDRESS	:		
CITY-ST-ZIP	LAKE FOREST, IL 60045		CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	DU
NAME			NAME			
STREET ADDRESS CITY-ST-ZIP		•	STREET ADDRESS	1		
TITLE		Detete	TITLE	-	☐ Change ☐ Additi	On.
NAME		- Deserte	NAME		- Strange - Notice	J.,,
STREET ADDRESS		·	STREET ADDRESS	i .		
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP			
indicated	certify that the information supplied with I on this report is true and accurate and ability company or the receiver or truster	that my signature shall have t	the same legal ef	fect as if I	d in Chapter 119, Florida Statutes. I further certify that the information a made under oath; that I am a managing member or manager of the piper 608, Florida Statutes.	

HALL FOWARD CUNTHER 8/21/06 847-980-3027
INTED HAME OF SIGNING MANAGING MEMBER, MANAGER, DR AUTHORIZED REPRESENTATIVE Date Degunto Phono 4