### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L05000087895

1. Entity Name G.P. TOWER 27. LLC



Principal Place of Business

Mailing Address

20803 BISCAYNE BLVD., SUITE #200 AVENTURA, FL 33180

20803 BISCAYNE BLVD., SUITE #200 AVENTURA, FL 33180

## FILED Jan 25, 2007 8:00 am Secretary of State

01-25-2007 90086 021 \*\*\*\*50.00

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ng-LLC CR2E083 (11/05)

4. FEI Number 20-3593439

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVID, ALAN 20803 BISCAYNE BLVD., SUITE #200 AVENTURA, FL 33180

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

#### Filing Fee is \$50.00 Due by May 1, 2007

9	MANAGING MEMBERS/MANAGERS
TITLE	MGR .
NAME	BEDZOW, MICHAEL
STREET ADDRESS	20803 BISCAYNE BLVD., SUITE #200
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	_
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filling does not qualify for the	

# DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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:

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

Date

Daytime Phone #