2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000099382

1. Entity Name

FIRST STATES INVESTORS 3126, LLC



Principal Place of Business

610 OLD YORK ROAD SUITE 300 JENKINTOWN, PA 19046 Mailing Address

610 OLD YORK ROAD SUITE 300 JENKINTOWN, PA 19046

FILED Jun 08, 2007 8:00 am Secretary of State

06-08-2007 90223 026 ****50.00

60051696



05182007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3609621

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional * Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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	*:			
	e named entity submits this statement for the purpose of char tions of registered agent.	iging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Fi Due (ling Fee is \$50.00 by September 14, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FIRST STATES INVESTORS DBI, L.P. 610 OLD YORK RD., SUITE 300 JENKINTOWN, PA 19046			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS				

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:

CITY-ST-ZIP

First States Investor DB I, L.P. – Managing Member

44 BOD

<u> 215:887.2280</u>

Daytime Phone #