

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109056

Entity Name: 45 W. 67TH ST., APT 15 ABC, LLC

FILED  
Mar 26, 2006  
Secretary of State

## Current Principal Place of Business:

411 LYCHEE ROAD  
NOKOMIS, FL 34275 US

## New Principal Place of Business:

## Current Mailing Address:

411 LYCHEE ROAD  
NOKOMIS, FL 34275 US

## New Mailing Address:

FEI Number: 20-3772740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COMERFORD, KATHLEEN  
411 LYCHEE ROAD  
NOKOMIS, FL 34275 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: COMERFORD, KATHLEEN  
Address: 411 LYCHEE ROAD  
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete  
Name: CUBERO, RAYMOND  
Address: 411 LYCHEE ROAD  
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete  
Name: WALL, KARL J  
Address: 411 LYCHEE ROAD  
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete  
Name: MOLESKI, ELAINE  
Address: 411 LYCHEE ROAD  
City-St-Zip: NOKOMIS, FL 34275 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KATHLEEN COMERFORD

MGRM

03/26/2006

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