

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 20, 2007 8:00 am
Secretary of State

02-20-2007 90369 039 ****50.00

DOCUMENT # L06000011025					
1. Entity Name FIRST STATES INVESTORS 3151, LLC					
Principal Place of Business 1725 THE FAIRWAY JENKINTOWN, PA 19046			Mailing Address 1725 THE FAIRWAY JENKINTOWN, PA 19046		
2. Principal Place of Business - No P.O. Box # 610 Old York Rd. Suite, Apt. #, etc. Suite 300 City & State Jenkintown, PA Zip 19046 Country USA		3. Mailing Address 610 Old York Rd. Suite, Apt. #, etc. Suite 300 City & State Jenkintown, PA Zip 19046 Country USA			
01232007 Chg-LLC CR2E083 (12/06)				4. FEI Number 20-4229626	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE MGR NAME SCHORSCH, NICHOLAS S STREET ADDRESS 1725 THE FAIRWAY CITY-ST-ZIP JENKINTOWN, PA 19046	<input checked="" type="checkbox"/> Delete		TITLE managing member NAME First States Group, L.P. STREET ADDRESS 610 Old York Rd., Ste. 300 CITY-ST-ZIP Jenkintown, PA 19046	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE MGR NAME BLUMENTHAL, GLENN STREET ADDRESS 1725 THE FAIRWAY CITY-ST-ZIP JENKINTOWN, PA 19046	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE MGR NAME MATEY, EDWARD J JR. STREET ADDRESS 1725 THE FAIRWAY CITY-ST-ZIP JENKINTOWN, PA 19046	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE MGR NAME HUFFMAN, SONYA A STREET ADDRESS 1725 THE FAIRWAY CITY-ST-ZIP JENKINTOWN, PA 19046	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			2/15/2007		215-887-2280
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
By: First States Group, L.P. - managing member By: First States Group, LLC - general partner of managing member					