

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047171

FILED
Sep 10, 2007
Secretary of State

Entity Name: CIRCLE RIVER LLC

Current Principal Place of Business:

10100 SANTA MONICA BLVD., #600
LOS ANGELES, CA 90067

New Principal Place of Business:

Current Mailing Address:

10100 SANTA MONICA BLVD., #600
C/O BRIAN Z. FRANCE
LOS ANGELES, CA 90067

New Mailing Address:

C/O STUART J HAFT ESQ
PO BOX 431
PALM BEACH, FL 33480

FEI Number: 20-4857982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HAFT, STUART J
340 ROYAL POINCIANA WAY, SUITE 321
C/O ALLEY MAASS ROGERS
PALM BEACH, FL 33480 US

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:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: FRANCE, BRIAN Z
Address: 10100 SANTA MONICA BLVD., #600
City-St-Zip: LOS ANGELES, CA 90067

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

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN Z FRANCE

MGR

09/10/2007

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