2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000103424

Address:

City-St-Zip:

Entity Name: RICHELSON TIMBERLEAF GP MEMBER, LLC

FILED Mar 30, 2009 Secretary of State

4 NEW KING STREET, SUITE 100

City-St-Zip: WHITE PLAINS, NY 10604 US

Current Principal Place of Business:		New Principal Place of Business:	
4 NEW KING STRE WHITE PLAINS, NY			
Current Mailing Address:		New Mailing Address:	
4 NEW KING STRE WHITE PLAINS, NY			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
	SERVICES OF CENTRAL FLORID GE AVENUE, STE. 1400 01 US	A	
The above named e in the State of Florid	ntity submits this statement for the part.	ourpose of changing its registered	d office or registered agent, or both
SIGNATURE:			
Ele	ectronic Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title:	() Delete	Title: MGRM	() Change (X) Addition

Address:

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: ERIC RICHELSON MGRM 03/30/2009