

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000001158
 1. Entity Name
WARREN STABLES LLC



Principal Place of Business Mailing Address
 219 ROYAL POINCIANA WAY 219 ROYAL POINCIANA WAY
 SUITE 10 SUITE 10
 PALM BEACH, FL 33480 PALM BEACH, FL 33480



04072004 No Chg-LLC CR2E083 (10/03)
 4. FEI Number Applied For
 58-2414549 Not Applicable
 5. Certificate of Status Desired \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 TALERICO, GENE I
 219 ROYAL POINCIANA WAY
 SUITE 10
 PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE

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: *Gene Talerico*, GENE TALERICO DATE: 4/14/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2004

000000117942
 04/19/04-80040-005 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WARREN, ROBERT M 303 EAST 51ST STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TALERICOD, EUGENE F 219 ROYAL POINCIANA WAY PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 605, Florida Statutes.

SIGNATURE: *Eugene F. Talerico, CFO*, EUGENE F. TALERICO, 4/14/04 212-752-7036
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #