2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# L99000004516

Entity Name: NEW HIDDEN VILLAGE ASSOCIATES, L.L.C.

Current Principal Place of Business:

2701 EAST LUZERNE STREET
PHILADELPHIA, PA 19137

New Principal Place of Business:

2701 E LUZERNE STREET
PHILADELPHIA, PA 19137

Current Mailing Address:

2701 EAST LUZERNE STREET
PHILADELPHIA, PA 19137

New Mailing Address:

2701 E LUZERNE STREET
PHILADELPHIA, PA 19137

FEI Number: 59-3591873 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MMBR ( ) Delete
Name: BERGER, STEVEN A
Address: 2701 E. LUZERNE ST.
City-St-Zip: PHILADELPHIA, PA 19137

Title: MMBR ( ) Delete
Name: GOODMAN, JON J
Address: 2701 E. LUZERNE ST.
City-St-Zip: PHILADELPHIA, PA 19137

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BERGER, STEVEN A
Address: 2701 E LUZERNE STREET
City-St-Zip: PHILADELPHIA, PA 19137

Title: MGRM (X) Change ( ) Addition
Name: GOODMAN, JON J
Address: 2701 E LUZERNE STREET
City-St-Zip: PHILADELPHIA, PA 19137

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: STEVEN A. BERGER VP 04/18/2008

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