


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 09, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000007296

1. Entity Name
CROSS CREEK REALTY HOLDINGS, LLC



Principal Place of Business C/O DENIS CRONIN 380 MADISON AVE., 24TH FLOOR NEW YORK, NY 10017	Mailing Address C/O DENIS CRONIN 380 MADISON AVE., 24TH FLOOR NEW YORK, NY 10017
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DO NOT WRITE IN THIS SPACE



08122004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 13-4098874	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by September 8, 2004**

U00000171994
 09/09/04 00005 000 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CROSS CREEK REALTY MANAGEMENT, LLC 380 MADISON AVE., 24TH FLOOR NEW YORK, NY 10017
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *[Signature]* 8/12/04 212-692-0004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #