


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 24, 2006 08:00 AM
Secretary of State

DOCUMENT# L99000008087 1. Entity Name AUDUBON GROUP, LLC	
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Principal Place of Business 207 WEST 25TH STREET, 8TH FLOOR NEW YORK, NY 10001	Mailing Address 207 WEST 25TH STREET, 8TH FLOOR NEW YORK, NY 10001
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DO NOT WRITE IN THIS SPACE



07192006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 58-2505372	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

SHANNON, JEFF
FOWLER WHITE B0665 BANKER, P.A.
501 EAST KENNEDY BOULEVARD SUITE 1700
TAMPA, FL 33602

**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 _____

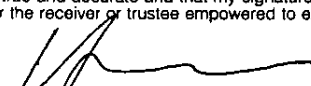
**Filing Fee is \$50.00
Due by September 6, 2006**

U000000572164
07/25/06-80019-001 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAPRIELIAN, HRATCH N 207 WEST 25TH STREET, 8TH FLOOR NEW YORK, NY 10001
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **7/19/06**

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