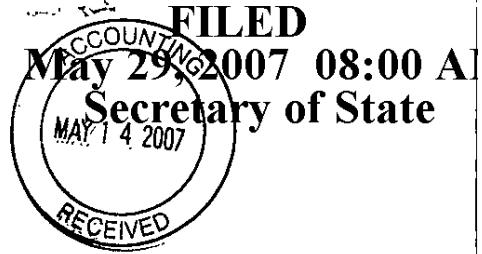


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT



DOCUMENT # M00000000037 1. Entity Name 2525 E. HILLSBOROUGH AVENUE, LLC	
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Principal Place of Business C/O URBANAMERICA, L.P. 30 BROAD STREET, 31ST FLOOR NEW YORK, NY 10004	Mailing Address C/O URBANAMERICA, L.P. 30 BROAD STREET, 31ST FLOOR NEW YORK, NY 10004
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04202007No Chg-LLC	CR2E083 (11/05)
4. FEI Number 13-4093245	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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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 _____ DATE _____
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, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 2525 E. HILLSBOROUGH AVENUE MM LLC 30 BROAD STREET 31ST FLOOR NEW YORK, NY 10004
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	

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U00000765510
06/01/07-80009-006 55.00

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: *[Signature]* Date: 5-14-07 Daytime Phone #: 612-9100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE