

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # M00000000275

1. Entity Name
CA NEW PLAN VENTURE FUND, LLC



Principal Place of Business
420 LEXINGTON AVE. 7TH FLOOR
NEW YORK, NY 10170

Mailing Address
420 LEXINGTON AVE. 7TH FLOOR
NEW YORK, NY 10170



04132007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2222193	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

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

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CA NEW PLAN VENTURE PARTNERS 20 LEXINGTON AVENUE, 7TH FLOOR NEW YORK, NY 10170
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUNBELT RETAIL L.L.C TWO SEAPORT LANE BOSTON, MA 02110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/02/07-80112-007 50.00

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.

Steven F. Siegel
for CA New Plan Venture Partner

4/13/2007 212-869-3000

SIGNATURE: _____