2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M00000002098

1. Entity Name TRG PROPERTIES - ORLANDO, LLC



FILED Apr 17, 2006 08:00 Al Secretary of State

Principal Place of Business

SIGNATURE:

200 EAST LONG LAKE ROAD BLOOMFIELD HILLS, MI 48304 Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

200 EAST LONG LAKE ROAD BLOOMFIELD HILLS, MI 48304



DO NOT WRITE IN THIS SPACE 01232006 No Chg-L

01232006No Chg-LLC CR2E083 (11/05)

4. FEI Number 38-3529782

Applied For Not Applicable

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

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	named entity submits this statement for the putions of registered agent.	rpose of chang	ing its regis	stered office	or register	ed agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.			(NOTE Registered Agent signature required when reinstalling)				CATE
Filing Fee is \$50.00 Due by May 1, 2006		7004	77FO	0003	8947	2361	100m00515296 04/29/06-80204-014 50:00 *
9.	MANAGING MEMBERS/MA	NAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAUBMAN, REALTY GROUP 200 EAST LONG LAKE ROAD BLOOMFIELD HILLS, MI 48303						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			. * ***	7		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u>. </u>	.			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							ing some some some some some some some some
11. I hereby indicated limited lia	certify that the information supplied with this fill on this report is true and accurate and that m billty company or the receiver or trustee empo	ing does not q y signature sh wered to exec	ualify for th all have the ute this sep	e exemptior same legal ort as requi	is contained effect as if red by Cha	d in Chapter 1 made under pter 608, Flori	19, Florida Statutes. I further certify that the information oath; that I am a managing member or manager of the da Statutes.