2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# M00000002281

Entity Name: BEL-EQR III L.L.C.

Current Principal Place of Business:

TWO NORTH RIVERSIDE PLAZA, SUITE 400
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

TWO N. RIVERSIDE PLAZA, STE. 400
ATTN: L. CURRIE
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-4398262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	AS	( ) Delete
Name:	SHUMAN, BARBARA	
Address:	TWO NORTH RIVERSIDE PLAZA	
City-St-Zip:	CHICAGO, IL 60606	
Title:	AS	( ) Delete
Name:	BAGINSKI, WENDY	
Address:	TWO NORTH RIVERSIDE PLAZA	
City-St-Zip:	CHICAGO, IL 60606	
Title:	AS	( ) Delete
Name:	BEIHOFFER, DENISE	
Address:	TWO NORTH RIVERSIDE PLAZA	
City-St-Zip:	CHICAGO, IL 60606	
Title:	AS	( ) Delete
Name:	DUWE, YASMINA	
Address:	TWO NORTH RIVERSIDE PLAZA	
City-St-Zip:	CHICAGO, IL 60606	
Title:	AS	( ) Delete
Name:	FIFFER, JAMES	
Address:	TWO NORTH RIVERSIDE PLAZA	
City-St-Zip:	CHICAGO, IL 60606	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BARBARA SHUMAN AS 04/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date