*2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M02000000702

1. Entity Name

PRUDENTIAL - PALM BEACH LLC



FILED
Apr 28, 2006 08:00 All
Secretary of State

Principal Place of Business

8 CAMPUS DR., 4TH FLOOR PARSIPPANY, NJ 07054 Mailing Address

C/O PRUDENTIAL PRE-LAW DEPT. 8 CAMPUS DR., 4TH FLOOR PARSIPPANY, NJ 07054



02062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE: _

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C. The photograph and said to highly state of the said to			
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, 2006			
9.	MANAGING MEMBERS/MANAGERS		
HILE	MGR	inc	שמתאמשב
NAME	THE PRUDENTIAL INSURANCE CO OF AMERICA	050 05/112)000544936 /06-80055-015 50.00
STREET ADDRESS	8 CAMPUS DR., 4TH FLOOR	69,11,	63/11/00-00632-013 30.00
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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 eath; 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.			

Barry Quiner, Lice President The Prudential Ensurance Company of America

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