2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 30, 2006 08:00 AM
Secretary of State

DOCUMENT # M02000003005

1. Entity Name
TIAA BAY ISLE KEY II, LLC

Principal Place of Business	Mailing Address
730 THIRD AVENUE, 9TH FLOOR NEW YORK, NY 10017	730 THIRD AVENUE, 9TH FLOOR NEW YORK, NY 10017

DO NOT WRITE IN THIS SPACE

05162006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
56-2305820

☐ 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

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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 September 6, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	SOMERS, JOHN A
STREET ADDRESS	730 THIRD AVE
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	T
NAME	CHINERY, GARY
STREET ADDRESS	730 THIRD AVE
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	VP
NAME	GARBUTT, THOMAS C
STREET ADDRESS	730 THIRD AVE
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	S
NAME	SERLEN, MARK L
STREET ADDRESS	730 THIRD AVE
CITY-ST-ZIP	NEW YORK, NY 10017
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/30/06-80005-019 50.00

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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 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: _____ Mark L. Serlen 5/23/06 (212) 916-4256
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #