


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # M02000003006 1. Entity Name TIAA THE RESERVE II, LLC	
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Principal Place of Business 730 THIRD AVENUE NEW YORK, NY 10017	Mailing Address 730 THIRD AVENUE NEW YORK, NY 10017
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05162006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2305821	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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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**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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.


**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOMMERS, JOHN A 730 THIRD AVE NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHINERY, GARY 730 THIRD AVE. NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GARbutt, THOMAS C 730 THIRD AVE NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SERLEN, MARK L 730 THIRD AVE NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

00000588332
05/30/06-80005-018 50.00

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IN THIS SPACE**

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 #