2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000221

Entity Name: NGP REALTY SUB GP, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
2951 28TH STREET, STE 3000 SANTA MONICA, CA 90405	

Current Mailing Address:	**New Mailing Address:**
2951 28TH STREET, STE 3000 SANTA MONICA, CA 90405	

FEI Number: 32-0051872   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR., SUITE 4 WESTON, FL 33331 US	

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: **ADDITIONS/CHANGES:**

Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	CASTELBLANCO, DAVID	Name:	
Address:	2951 28TH STREET, STE 3000	Address:	
City-St-Zip:	SANTA MONICA, CA 90405	City-St-Zip:	
Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	KAVA, ALAN	Name:	
Address:	2951 28TH STREET, STE 3000	Address:	
City-St-Zip:	SANTA MONICA, CA 90405	City-St-Zip:	
Title:	MGR ( ) Delete	Title:	MGR (X) Change ( ) Addition
Name:	GEIMAR, ROBERT	Name:	GEIMER, ROBERT
Address:	2951 28TH STREET, STE 3000	Address:	2951 28TH STREET, STE 3000
City-St-Zip:	SANTA MONICA, CA 90405	City-St-Zip:	SANTA MONICA, CA 90405

I hereby certify that the information supplied with this filing does not qualify 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: CHRISTINE CHONG   SEC   07/02/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date