

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 07, 2006 08:00 AM
Secretary of State

DOCUMENT # M03000001845

1. Entity Name
CABOT INDUSTRIAL VENTURE B, LLC



Principal Place of Business
C/O GLOBAL SECURITIZATION SERVICE
103 FOULK ROAD, SUITE 205-11
WILMINGTON, DE 19803

Mailing Address
C/O GLOBAL SECURITIZATION SERVICE
103 FOULK ROAD, SUITE 205-11
WILMINGTON, DE 19803



01232006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0032527

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

**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 _____

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEAVER, DANIEL S 875 NORTH MICHIGAN AVE., 41ST FLOOR CHICAGO, IL 606111901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEITNER, CHARLES B III 280 PARK AVENUE 40TH FLOOR NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COOK, ROBERT J 875 NORTH MICHIGAN AVENUE 41ST FLOOR CHICAGO, IL 606111901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OTTO, WARREN H 101 CALIFORNIA STREET, 26TH FLOOR SAN FRANCISCO, CA 94111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUGHES, CHRISTOPHER L 875 NORTH MICHIGAN AVE., 41ST FLOOR CHICAGO, IL 606111901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUSSELL, ERIC 6759 SIERRA COURT, SUITE 3 DUBLIN, CA 94568

U00000424736
02/18/06-80062-003 50.00

**DO NOT WRITE
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: _____

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

Robert J. Cook, Vice President

Date _____

Daytime Phone # _____