

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # M03000004233

1. Entity Name
MSPA ACQUISITION II GP, L.L.C.



Principal Place of Business
1585 BROADWAY, 37TH FLOOR
NEW YORK, NY 10036

Mailing Address
1585 BROADWAY, 37TH FLOOR
NEW YORK, NY 10036

DO NOT WRITE IN THIS SPACE



04252006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-0470485

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
MGRM
MSPA SENIOR MEZZCO II, L.L.C.
1585 BROADWAY, 37TH FLOOR
NEW YORK, NY 10036

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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1000000538008
05/09/06-80040-022 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: _____

Warren Fields

4/25/06

617-946-2033

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

Date

Daytime Phone #