

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 02, 2007 8:00 am
Secretary of State

07-02-2007 90092 004 ****50.00

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



05092007 No 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

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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 September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MSPA SENIOR MEZZCO II, L.L.C.
STREET ADDRESS	1585 BROADWAY, 37TH FLOOR
CITY-ST-ZIP	NEW YORK, NY 10036

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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: _____

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

Date

Daytime Phone #