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Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90039 040 ****50.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M04000000475 1. Entity Name ST. PETERSBURG, FL RETAIL LLC	
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Principal Place of Business 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022	Mailing Address 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022
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DO NOT WRITE IN THIS SPACE

01042005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0538231	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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. (NO "E" Registered Agent signature required when re-stating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

B. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TRM REALTY CORP. R.P. & S.W. Manager Corp 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Ronald I. Oehl President 1/13/05 212-753-4578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #