2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 25, 2005 8:00 am Secretary of State

DOCUMENT # M0400001373 1. Entity Name AMC DELANCEY SOUTHPOINT, LLC					02-25-2005 90023 047 ****50.00			
Principal Place of Business 718 ARCH STREET, SUITE 400N PHILADELPHIA, PA 19106		Mailing Address 718 ARCH STREET, SUITE 400N PHILADELPHIA, PA 19106						
2. Principal Place of Business CO AHC Delancy Group, Inc.		3. Mailing Address Clo AMC Delancy Conv. In		u) , Tu (-			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01102005	Chg-LLC	CR2E083 (10/03)	
City & State		City & State			4. FEI Numb	886399		pplied For
Zip	Country	Zip	Country		•	of Status Desired	□ \$5.00 Ad	
	6. Name and Address of Current R	ealstered Agent				Address of New R	Fee Require	ed .
0.7.0000	Name							
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		Street Address		Address (P.0	(P.O. Box Number is Not Acceptable)			
	,							
			City				FL Zip Coo	
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its r	egistered office of	r registered	agent, or bo	th, in the State of Flo	orida. I am familiar with	and accept
SIGNATURE	;							
	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signs	ture required wh	nen reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2005								
Fi D	iling Fee is \$50.00 ue by May 1, 2005						te check payable to a Department of Stat	Le
9.	ue by May 1, 2005 MANAGING MEMBER	·	10.				a Department of Stat	ė
D	we by May 1, 2005 MANAGING MEMBER MGR	S/MANAGERS	TITLE	Presid	en+	Florida	a Department of Stat	Addition
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGR BALIN, KENNETH P 718 ARCH STREET, SUITE 400N	·	TITLE NAME STREET ADDRESS	Presid	en+	Florida	a Department of Stat	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGR BALIN, KENNETH P 718 ARCH STREET, SUITE 400N PHILADELPHIA, PA 19106	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Presid	cu t-	Florida	a Department of Stat /CHANGES	Addition
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGR BALIN, KENNETH P 718 ARCH STREET, SUITE 400N	·	TITLE NAME STREET ADDRESS	Presid	ent	Florida	a Department of Stat	
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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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

A PRINCIPAL NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

5/05 2

215-627-650

Daytime Phone #